

THE ROLE OF RELIGIOUS EXPERIENCE IN PSYCHOTHERAPY AND MENTAL
ILLNESS OF BLACK PEOPLE IN A SOUTH CENTRAL LOS ANGELES
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ABSTRACT

This project is an idiographic study of the question, "Does religion have a viable place in the treatment of mental illness and the maintenance of mental health?"

The study is made with the following purposes in mind: (1) to provide an understanding for the reader of how certain psychoanalytic and psychosocial terms are understood and used by the writer; (2) to provide an understanding of the psychoanalytic view of the psychosocial development of the person; (3) to provide an understanding of the religious dimensions of each stage of development through the typology of Christian religious experience outlined in the case illustrations, utilizing the works of recognized psychoanalytic theoreticians as authoritative foundation; (4) to demonstrate in clinical cases and surveyed literature the function of religious experience in the lives of mentally ill persons who are undergoing psychotherapy; (5) to draw certain conclusions from the clinical and theological materials surveyed as to the value of religious experience as a source of treating mental illness and maintaining mental health; (6) to suggest methods whereby further investigation and conclusion may be made, confirmed, refined or even changed.

Three case histories are used in the research design. They were selected from a number of cases I have been seeing as a therapist

in mental health clinics over a six-year period. Cases of other co-workers are also used. Names are disguised to protect and preserve confidentiality. These case materials were selected on the basis of three criteria: (1) was religious belief/experience an integral part of the person's psychic structure and interpersonal life; (2) was religious faith valuable in the person's life prior to and during psychotherapy; (3) is religious faith/experience a viable agent for re-integrating the personality through psychotherapy.

The research project suggests that religious faith and experience do provide a source of emotional growth, stability and improvement of psychosocial functioning for the mental patient being therapized in the following ways: (1) it provides powerful symbolic parental figures who help to control the behavior of natural or surrogate parents and therefore reinforces the child with his sense of fear and helplessness in the face of parents he perceives as giants; (2) it offers powerful parental figures which can be used as a defense against overwhelming emotional pain due to any loss of natural parents, especially during the critical developmental years, which could result in psychic and social crises; (3) it offers an extra-powerful auxiliary superego of grace-love, understanding and forgiveness to offset the punitive, unforgiving, self-depreciating internalized superego; (4) it offers a super-powerful auxiliary superego of control to offset an internalized psychopathic superego or id impulses which often threaten to overwhelm the ego;

(5) it offers a fellowship, family or community of caring persons (real or mythologized) wherein the person may be socialized and learn moral and socially acceptable ways of living as an individual and within social groups; (6) it offers a community of caring persons who may serve as substitutes for natural parents lost by death or other physical separation; (7) it offers a unique experience through which persons may atone for guilt arising from sins or unacceptable behavior committed by thoughts, words or deeds, or arising out of the loss of control of impulses or covert actions; (8) it offers powerful transference figures which illicit unconscious feelings toward the oedipal father or the oral mother in ways that natural parents cannot; (9) it dramatizes unconscious dynamics in mystical form, evoking affective responses from worshippers and creating anxiety and the need for change; (10) it offers preaching and singing as a means of intimacy and support from other persons; (11) it offers prayer as a therapeutic tool through which the dynamics of the patient's relationship with other healthy parent figures can be introjected; (12) prayer is also offered as a means of dialogue with such superego introjects as God, Christ or universal Father, which leads to the release of repressed impulses.

CHAPTER I

INTRODUCTION

One of mankind's greatest cultural forces which has emerged into the foreground through repeated investigations of depth psychology is that of religion. For many years psychotherapists have touched upon the phenomenon of religion and have, in the main, realized that this phenomenon cannot be simply by-passed or ignored. The problem is multifaceted. Firstly, there are many religious questions which are surfaced through psychoanalytic treatment such as: religious compulsive neurosis with its scrupulosity, irrational guilt feelings, shame, etc. Experience has taught this writer that problems that may involve religion often surface and become pressing during psychotherapy.

Patients may sometimes be confused over a discrepancy between dogmatic faith and personal religious experience or a discrepancy between a set of imposed standardized moral principles or expectations and their own sense of personal ethics. Still another discrepancy is the opposition which may exist between the conscious and unconscious content of religious experience.

Spiritual health or mental health has been a major concern of the Christian church from its inception. Religion, and particularly the Christian religion, has always and shall continue to play a key role in mental health treatment and illness, and to overlook this proven

assumption is to overlook what is considered to be necessary to effective mental health treatment, and maintenance, and the prevention of mental illness.

Distorted and misguided religious beliefs and practices may sometimes contribute to and aggravate mental illness. They may also be symptomatic of mental illness. Yet, religion, and particularly the Christian religion, rightfully understood and applied, can be a curative and integrative force within the personality. It is in response to these assumptions that this dissertation is written.

A. DEFINITION OF THE PROBLEM

The problem with which this dissertation concerns itself is whether it can be demonstrated that religion can be valuable and effective as a curative force or tool in psychotherapy.

More specifically this dissertation is concerned with two research questions: (1) can it be demonstrated clinically that the Christian religion is effective in the treatment of mental illness, (2) can it be clinically demonstrated that the Christian religion be an integrative force in the personality or a source of emotional stability, (3) can it be clinically demonstrated that certain religious beliefs and practices cause or aggravate mental illness.

The term "religion" is used in the dissertation to indicate both the objective and subjective participation in the faith, fellowship,

worship and services of the institutional Christian church and particularly as it is experienced in the Black community.

The hostility with which earlier religious thinkers greeted Freud and the effects, in turn of his remarks about religion, have not disappeared by any means. The lack of sufficient tolerance has not allowed for much understanding about what either Freud or religious leaders actually meant. Nevertheless, within both psychiatric and Christian groups there are some who have found a harmonization between religious faith and mental health not only possible, but well nigh inescapable. Progress of cooperation between religion and psychotherapy will depend largely upon each discipline's willingness to lay aside rigid preconceptions in order to gain deeper insight and collaborate on how the two may better work together.

But such collaboration can be blocked by religious thinkers and practitioners who seize upon popular misrepresentations of psychoanalysis and psychotherapy as an excuse of dismissing it without proper and adequate examination. Any collaboration may also be blocked by psychiatrists, psychoanalysts and other mental health practitioners who are bent on explaining away religious belief as illusory without testing and re-examining their formulae in light of a broad, sympathetic, first-hand acquaintance with religion at its best, particularly the Christian religion, as it is believed and practiced by Black people.

The term "emotional stability"¹ is used here to indicate the increased capacity to love and work as a result of intervention into the personality of the person involved in psychotherapy by forces inside and outside of the self (repressed unconscious).

B. THE VALUE OF THE STUDY

Since psychoanalysis was introduced by Sigmund Freud and his earlier followers, religion and especially Christianity has been put somewhat on the defensive. His fundamental position in The Future of an Illusion that religion is a universal neurosis has caused persons inside and outside of Christianity to re-examine the meaning, purpose and function of religious beliefs and practices.

A study such as that which is undertaken in this dissertation is of extreme importance to the life of the church, especially with the increase of mental illness, family and social disintegration and criminal behavior affecting the lives of the people. In search for answers to these and related problems, many people have turned to the more unorthodox, traditional churches and cults only to discover that there are not any easy answers to our complex problems. The recent "Jonestown" ordeal

¹Robert S. Wallerstein, "The Goals of Psychoanalysis: A Survey of Analytic Viewpoint," Journal of the American Psychoanalytic Association, XIII:4 (1965), 748.

where more than nine hundred human beings (God's children) either committed suicide or were murdered, may make us aware of what we have always known. That is, mankind cannot be his own god and remain healthy. We must continue to rely on that "Great Power" which lies outside of ourselves, God through Jesus Christ, our Lord.

In view of all that has occurred and is occurring around us daily, we need to more seriously examine whether Christianity is, in fact, a "universal neurosis" from which humankind needs to be freed or whether Christianity is a source of moral, cognitive and spiritual strength from which we can draw for the purpose of living more meaningful, effective and abundant lives.

Should the answers to these research questions turn out in the affirmative, our study will have further value in that it will offer insights and methods which will enable us to encourage greater use of the Christian religion as a source for the care and cure of the body, mind and spirit. The insights and methods gained from the study should prove to be effective and available in all aspects of the life of the church and community.

C. PREVIOUS STUDIES

During the latter years of his life Sigmund Freud devoted much time and effort to the study of religion. His works have been interpreted and presented to us by several well-known scholars, one of whom was

Ernest Jones.²

We will concern ourselves with the basic criticism of religion which permeates Freud's work, i. e., that religion is a universal neurosis because it permits man to externalize his inner wishes and impulses and thereby avoid responsibility for them.

Noteworthy is the observation that both Freud's general works on religion and his case histories, which, again, deal with religious materials, deal with religion as a neurotic solution from which the person must be freed.

With the exception of a brief comment there is no known other of his works which seem to aim at demonstrating religion's capacity to free or protect humankind from neurosis.³

Furthermore, there is no known psychoanalytic work which seeks to demonstrate that a person may become more responsible for himself and his or her impulses as a result of his or her religious faith and practices.⁴ This fact comes as an appalling surprise to any liberal Protestant who has been raised in an atmosphere which stressed

²Ernest Jones, The Life and Works of Sigmund Freud (New York: Basic Books, 1957), III, 32.

³Sigmund Freud, Civilization and Its Discontents (New York: Norton, 1961; originally printed 1929), 11.

⁴Jones, III, 349.

Christian personal and social responsibility for social ills.

The lack of adequate study in the area of psychoanalysis and psychotherapy and the Christian world-view is unfortunate for at least two reasons. Firstly, while few persons in our society seem to feel the need for permission or recommendations from church leaders prior to seeking psychotherapy, a sizeable number of Christians view psychotherapy as being somewhat alien to Christian belief and practice, giving rise to two types of observable behavior toward psychotherapy and mental health practitioners. On the one hand there is either a total refusal to have anything to do with psychotherapy, which can be self-destructive for those maintaining such extreme views, or the permission or sanctioning of psychotherapy may be sought from such church leaders as may be trained and insightful enough to see the value of psychotherapy as a legitimate alternative to misery, tension, and discomfort.

Notwithstanding the fact that Freud did not publish works concerned with the value of religion for personality integration and/or change, it is interesting to observe that Freud spoke of himself as a "secular pastoral worker"⁵ and on one occasion wrote his pastoral friend, Oskar Pfister, that he was "very much struck by the fact that it never occurred to me how extraordinarily helpful the psychoanalytic method

⁵Ibid, III, 374.

might be in pastoral work, but that is surely accounted for by the remoteness from me, as a wicked pagan, of the whole system of ideas."⁶

Since Freud's pioneering work, many psychoanalysts have devoted many works to religious phenomena. Interestingly enough, the best known of these works do not approach the problem as Freud did, i. e., by observing the dynamics of religious phenomena in the life of individual patients. For example, in three well-known books, Theodor Reik addresses himself to religious themes and analyzes them in terms of their unconscious meanings. Never does he, however, offer clinical cases where the function of these religious themes can be seen in the psychic make-up of an individual.

In a survey of The Index of Psychoanalytic Writings⁷ we find, with only one significant exception, that religion is approached in one of the two ways described above, i. e., individual case histories where religion is used as a neurotic solution from which the individual must be freed, or general psychoanalytic discussions of the unconscious meaning of certain religious myths or rituals.

The one significant exception to the above is in the writings of Freud's friend, the Swiss Protestant pastor, Oskar Pfister. In a

⁶Ibid, III, 375.

⁷Ibid, III, 376.

number of works,⁸ he sought to demonstrate the value of religion as a protection against neurosis and/or as a therapeutic tool in the resolution of neurosis. Pfister approached the problem of religion as Freud did, by observing its function in the psychic structure of individual patients and drawing his conclusions from these observations.⁹

If Freud is the father of psychoanalysis, then Oskar Pfister must be called the father of an appreciative psychoanalytic understanding of religion.

D. RESEARCH DESIGN

1. Basic Approach to Religious Phenomena. Albert

Schweitzer comments that:

Progress always consists in taking one or the other of two alternatives, in abandoning the attempt to combine them. The pioneers of progress have, therefore, always to reckon with the law of mental inertia which manifests itself in the majority--who always go on believing that it is possible to combine that which can no longer be combined, and in fact claim it as a special merit that they, in contrast with the 'one-sided' writers, can do justice to the other side of the question. One must just let them be, till their time is over, and resign oneself not to see the end of it, since it is found by experience that the complete victory of one of two historical alternatives is a matter of two full theological generations.¹⁰

⁸Carl G. Jung, Modern Man in Search of a Soul (London: Kegan Paul, Trench, Trubner, 1933)

⁹Oskar Pfister, The Psychoanalytic Method (New York: Moffat, Yard, 1917), p. 83.

¹⁰Albert Schweitzer, The Quest for the Historical Jesus (New York: Macmillan, 1950), pp. 238-239.

In approaching religious experience dynamically and clinically, we are forced to make the kind of choice between two alternative approaches of which Schweitzer speaks. Does religion deal with an extranatural world outside of man (the narrow sacramental viewpoint) or does religion deal with experiences that take place within man's natural experiences, his inner world? I (frankly) accept the second position and work within that frame of reference.

This project is postulated, therefore, on a basic assumption. The basic assumption is this: The world with which religion is concerned is a world within-beyond human experience. Its roots are established within the cultural orientations of human actions, social systems and the personalities of individuals.

This world is described as "within" because it is in the realm of man's experience, governed by the same cause and effect processes and open to scientific investigation just as other aspects of reality are.¹¹

This world is described as "beyond" also because man's conscious experiencing mind sees this world as beyond him, i.e., outside of his awareness. Self-conscious man experiences the world of the unconscious as mysterious, beyond, supernatural.

St. Augustine was puzzled over this paradox of within-beyond

¹¹Robert W. White (ed.), The Study of Lives (New York: Atherton Press, 1964), p. 143.

centuries ago when he said:

Great is this power of memory, exceedingly great. O, my God, a spreading limitless room within me. Who can reach its uttermost depth? Yet it is a faculty of soul and belongs to my nature. In fact I cannot totally grasp all that I am. Thus the mind is not large enough to contain itself; but where can that part of it be which it does not contain? Is it outside itself and not within? How can it not contain itself? As this question struck me, I was overcome with wonder and almost stupor. Here are men going afar to marvel at (great external natural wonders) yet leaving themselves unnoticed.¹²

The value of religion as a system is that it preserves the power and "otherness" of the unconscious world. The danger of this approach is that in assuming that religious language and imagery comes from the inner world, we are also tempted to assume that it could not therefore be very powerful, overwhelming or earthshaking. But the inner is also reflective of the outer.

To restate the basic assumption in a different way: The "world" which religious language describes and deals with is within persons; it is imbedded in his own unconscious. This world has all of the otherness and power which religion demonstrates in its symbolic language. Its "within-ness and unfelt-ness" does not mean it is not present or powerful.

This world inside of mankind, the unconscious, is made up of the giant, powerful parental images and small, weak child images of

¹²Lancelot L. Whyte, The Unconscious Before Freud (New York: Doubleday, 1962), p. 73.

his own infantile beginnings. It is a world created out of the situation of the prolonged infancy of the human being and, most important--even though grows to adulthood both physically and spiritually--it is a world that persists to the end of life, particularly in our society.

Erik Erikson points this out dramatically when he says:

One may scan work after work on history and society and morality and find little reference to the fact that all people start as children and that all people begin in their nurseries. It is human to have a long childhood; it is civilized to have an even longer childhood. Long childhood makes a technical and mental virtuoso out of man, but it also leaves a lifelong residue of emotional immaturity in him.¹³

It is out of several years' experience as a preaching minister and as a psychiatric social worker and pastoral counselor that this basic assumption has come as well as the desire to do this dissertation. My own experience has taught me to believe that the institutional church (despite its frequently demonstrated inadequacies) provides a constant invitation to and confrontation by religious beliefs and practices which help persons to experience and deal with this world which is within-beyond them. Man's task is to find a "home", to re-bind (religion) the powerful images and impulses inside of himself into an integrated whole in and out of which he lives as an adult human being. To attempt to become more precise about the dynamics of "the world of the spirit" does not

¹³Erik H. Erikson, Childhood and Society (New York: Norton 1963), p. 16.

make one less religious. Religious phenomena are approached therefore, as a product of and attempt to deal with the unconscious, the inner world of man.

The institutional church and the various traditions which it preserves and presents confronts mankind with this need and offers us guidelines and resources in our struggle to meet it. More than any institution in my experience, the Christian church and the Christian gospel, rightly understood, offers mankind the way and the resources to deal with his unconscious forces wholistically.

I have had no other experience where an adult human being is so openly and frankly invited to become like a little child--to feel fear, love and judgment as a little child feels it, to learn to live openly with these feelings, and finally to bind them into a meaningful whole, out of which one lives rather than by which he is imprisoned--than the experience of belonging to and worshipping the Christian religion. This writer grew up in the church from infancy, and has spent most of his natural life in the ministry beginning at age twelve.

2. Psychological Framework Within Which Research Carried

Out. The personality theory which undergirds the research done for this dissertation project is psychoanalytic. In comparison to other personality theories to which I have been exposed, it is the most comprehensive and relevant in dealing with the phenomena of personality which

I see in my daily work. The method of research used for the project is the psychoanalytic method. There are other methods of treatment, especially for the psychoses, which may be as effective or more effective than psychoanalysis, but I know of no method of treatment that offers so much to the researcher and his research concerns.

The use of psychoanalytic theory as a frame of reference and of psychoanalytic technique as a method of research comes under a cloud when applied to research in religion because of the so-called atheism of the founder of psychoanalysis, Sigmund Freud.

Freud's atheism, however, is a separate issue from the issue of whether or not psychoanalysis presents an adequate theory of personality and an adequate method of research. Freud himself suggested this when he stated:

If one can find a new argument against the truth of religion by applying the psychoanalytic method, so much the worse for religion, but the defenders of religion will with equal right avail themselves of psychoanalysis in order to appreciate to the full the affective significance of religious doctrines.¹⁴

In this project, Freud's invitation is accepted and psychoanalysis is used to appreciate to the full the affective significance of religious doctrines.

Further, it is interesting to note that while in The Future of an Illusion, Freud warns against the dangers of religion as an evasion of

¹⁴ Sigmund Freud, The Future of an Illusion (New York: Doubleday, 1957), pp. 65-66.

reality, elsewhere he states two years later that:

Religion, at any rate, has never overlooked the part played in civilization by a sense of guilt. Furthermore--a point which I failed to appreciate elsewhere (i. e., in The Future of an Illusion)--they claim to redeem mankind from this sense of guilt.¹⁵

Finally, Freud comments that "all that (I) ... claim is to have added a new factor to the sources, known or unknown, of religion...I must leave to others the task of synthesizing the explanation into a unity."¹⁶ Some of us feel that Freud's criticism of religion is valid and that it does not necessarily lead one to being anti-religion or to being an atheist. It is our task, however, to synthesize his comments and criticism into a more inclusive framework that does justice to the issues he raises. We need to cease and desist the frequent sin of churchpersons where difficult issues are avoided by calling the persons who raise them heretics or atheists. Religious truth is derived from both faith and reason, creativity and tolerance.

3. Method of Research. The method of research used in this project is idiographic in contrast to nomothetic. Gordon Allport distinguishes nomothetic research from idiographic research in the following way: Nomothetic research refers to statistically reliable general

¹⁵Freud, Civilization and Its Discontents, p. 83.

¹⁶Sigmund Freud, Totem and Taboo (New York: Random House, 1918), p. 157.

principles drawn from a large collection of data from individual lives; idiographic research refers to generalizations based on a single life studied in depth.¹⁷

According to Allport the most rigid tests of scientific procedure are the tests of understanding, prediction and control.¹⁸ These tests can be based on the understanding of a single life as well as on the frequency of occurrence in a multitude of cases.¹⁹

For the research in this project the case histories of three persons seen over a period of three to five years in intensive individual and group psychoanalytically-oriented psychotherapy have been used. The case histories were selected from over one hundred persons seen in this way, for whom religion was either therapeutic or counter-therapeutic for any given patient.

The case histories were selected on the basis of two criteria: (1) were religious experiences an integral part of the person's psychic structure and interpersonal life; (2) were religious experiences valuable in this person's life prior to therapy and during therapy as a source of emotional stability and/or therapeutic change.

¹⁷Gordon W. Allport, The Use of Personal Documents in Psychological Science (New York: Social Science Research Council, 1942), pp. 53-64.

¹⁸Ibid., p. 53.

¹⁹Ibid., p. 59.

Cases where religious experiences served as a neurotic defense or as a part of a neurotic or psychotic conflict were deliberately included. The question that is pursued in this project is can religious experience be a source of personality stability and/or therapeutic change. No effort is made to prove (nor is it believed by the writer) that religious experience always functions this way.

Religious experience obviously can be used as a neurotic defense or can become a part of a neurotic or psychotic conflict. This, however, can also be said about psychoanalytic theory or an experience in psychoanalytic therapy, i. e., that one can use his understanding of psychoanalytic theory or his experience in psychoanalytic therapy as a neurotic defense or as a part of a neurotic or psychotic conflict.

In regard to the first research question: Are religious experiences valuable in some cases as a source of emotional stability? the clinical material was used in the following ways: (1) observing the psychic structure of persons actively participating in religious worship and demonstrating their nature and value as a source of emotional stability by deduction based upon the psychoanalytic theory of personality; (2) demonstrating the nature and value of religious experience by observing the change in the person when opportunities to engage in religious activities are withdrawn.

In regard to the second research question: Is religious experience valuable as a source of therapeutic change in some cases? the

clinical material was used in the following ways: (1) observing the evocative effect of religious experience upon the psychic structure, induction of anxiety and the need for change; (2) using religious experience and observing the results of such use in the therapeutic encounter itself (interpretations couched in religious language and pointing to the religious tradition, interpretations of transference distortions by the patient of the religious experiences in his life, suggesting the use of religious experience by the patient such as prayer, communion, etc.); (3) observing the use a person makes of religiosity to aid him in personality change, reorganization, and social mobility.

4. Basic Limitation of the Research Method. The basic limitation inherent in the method of research used in this project is that the case histories are recorded and interpreted by one person, the writer.

Obviously, in the recording of the experience of another person one is never completely objective and this is even more difficult when the recorder is involved as a therapist in many of the experiences which he is recording. The same is true in the interpreting of the meaning of the experiences recorded.

In the concluding chapter of the dissertation several future research designs will be suggested which protect against the subjectivity of one person's recording and interpreting of the clinical material.

This basic limitation, however, does not render the research meaningless. Certainly the generalizations drawn from the individual case material can be used by other investigators in their work by applying the tests of scientific procedure: understanding, prediction, and control. If the generalizations stand up in the work of another investigator, then there is more reason to trust them. If they do not stand up, then the investigator can attempt to understand the material before him in a more meaningful way.

5. The Organization of the Dissertation. The remainder of the project is arranged with the following purposes in mind: (1) to provide an understanding for the reader of how certain psychoanalytic terms are understood and used by the writer; (2) to provide an understanding of the psychoanalytic view of the "Oedipus Complex" and the "Oral Stage of Development"; (3) to provide an understanding of the religious dimensions of each of these two stages of development through the typology of the "Oedipus" and "Orestes" plays of Greek drama; (4) to demonstrate in clinical cases the function of religion in the lives of persons struggling with "Oedipal" or "Oral" conflicts; (5) to draw certain conclusions from the clinical material as to the value of religion as a source of personality stability and therapeutic change; (6) to suggest methods of research through which the conclusions emerging from this investigation might be confirmed, refined or changed.

Chapter II deals completely with psychoanalytic theory of personality and method of treatment. An attempt is made to present psychoanalytic theory as a process rather than a static phenomenon.

Chapter III deals with religious experience and the internalized father in view of the psychoanalytic "Oedipus Complex" and its religious dimensions. The case histories presented will help to elaborate upon these age-old Freudian concepts in the light of religious experience. It will also deal with a psychoanalytic analysis of the origin of sin, guilt, fear, forgiveness, sacrament and socio-political struggling and striving which are experienced in the broader society as well as religious institutions. It deals with the role of religion in personality development.

Chapter IV will deal with religious experience and the internalized mother as discussed in the psychoanalytic oral stage of development. It also deals with religious dimensions of the oral stage of development, the development of subject-object relations and organized consciousness, ego and superego, punishment and reward, guilt and rage which give rise to depression, neuroses and suicidal and homicidal ideation and impulses.

Chapter V will deal with psychotherapy in theological perspective, reflecting much thinking of such renowned theologians as Reinhold Niebuhr, Albert C. Outler and David E. Roberts and others. It will focus upon what these theologians are saying about the nature of man from the point of view of the Christian faith. It will reflect upon the dangers which the practice of psychotherapy might hold for such a view.

CHAPTER II

THE PSYCHOANALYTIC THEORY OF PERSONALITY AND
METHOD OF TREATMENT

This chapter is an attempt to present a summary sketch of the psychoanalytic theory of personality and method of treatment.

The psychoanalytic position grows out of and rests upon two basic assumptions, psychic determinism and the reality of the unconscious. Psychic determinism refers to the fact that in the mind as in the physical world, "nothing happens by chance, or in a random way. Each psychic event is determined by the ones which preceded it. Discontinuity in this sense does not exist in mental life."¹ The concept of the unconscious refers to the "existence and significance of mental processes of which the individual himself is unaware or unconscious.

By its theoretical description of the structure and dynamics of the human being's mental life (his "structural hypothesis") psychoanalysis distinguishes between three different groups of psychic functions that go to make up the individual's psychic apparatus, the id, the ego and the superego.²

¹Charles Brenner, An Elementary Textbook of Psychoanalysis (New York: Doubleday, 1951), p. 2.

²Ibid., p. 4.

The id is the psychic representation of the drives of the human organism. A drive is a "genetically determined, psychic constituent which, when operative, produces a state of psychic excitation or, ... tension. This excitation or tension impels the individual to activity, which is also genetically determined in a general way, but which can be considerably altered by individual experience. This activity should lead to... cessation of excitation or tension, or gratification."³ An attribute of this drive is psychic energy or libido which impels the individual to activity analogous to the concept of physical energy. The id drives seek immediate and direct gratification of need in relation to the outer world, reality. (For the sake of simplification I am treating the aggressive and sexual drives as distinguished by Freud as one, i. e. , libido.)

The ego designates that group of psychic functions having to do either principally or to an important degree with the person's relationship to the outer world, his environment. It is the executant for the drives of the id and its primary relationship to the id is one of cooperation. The ego seeks to exploit the environment for the gratification-discharge of id drives (i. e. , wishes, urges, psychic tensions which arise from drives and constitute the id) and also to avoid pain and/or discomfort in the process (the pleasure principle).⁴ The ego is

³Ibid. , p. 18.

⁴Ibid. , p. 40.

originally undifferentiated from the id and in the development of the organism it emerges out of the id. This emergence occurs as the organism acquires knowledge of and some degree of mastery over the environment.

In addition to seeking to satisfy id drives directly and immediately the ego develops the ability to delay, control or otherwise oppose discharge of id energies. This increases the ability of the ego to exploit the environment for the benefit of the id but also leads the ego to argue the claims of the environment against the id.

The ego keeps the impulses of the id in check by the use of defenses (repression, reaction formation, projection, sublimation). One of the most important defenses in terms of the person's normal development is sublimation. In this activity, the original desired activity--need for direct drive satisfaction is modified in the direction of social acceptability and approval. The original impulse as such has become unconscious. A substitute activity is provided which "at the time conforms with the demands of the environment and gives a measure of unconscious satisfaction to an infantile drive derivation which has been repudiated in its original form."⁵

The superego carries out the moral functions of the personality. It is what is commonly called the conscience.⁶ It is "formed as a

⁵Ibid. , p. 107.

⁶Ibid. , p. 124.

consequence of the identification with the moral and prohibiting aspects of parents. In a sense it is the internalized image of the environment, communicated most basically through parents, which helps the ego know without reality testing every wish, how it ought to handle id drives in order to live in its environment with the maximum amount of pleasure and minimum amount of unpleasure. The superego approves of disapproves of actions and wishes on grounds of rectitude and inflicts punishment or praise upon the ego. Thus the ego may find the superego a trustworthy guide in its attempt to exploit reality for the sake of the id and for sake of avoiding unpleasant experiences, or it may find the superego an enemy in the sense that it blocks the ego in its task. When the latter occurs, the ego must use defenses against the superego even as it had to use defenses against the id in order to effectively carry out its task.⁷

Each of the three groups of psychic functions, the id, ego and superego can be unconscious or conscious. In all cases most of the psychic function is unconscious. (Freud's iceberg illustration.)

The psychic apparatus (id, ego, superego) has two modes of functioning, the primary process and the secondary process. These are used to describe two types of thinking characteristic of the psychic apparatus and two ways of dealing with and discharging psychic energy.

⁷Ibid. , pp. 124-125.

The id functions according to the primary process throughout its life and the ego during the first years of life. The secondary process develops gradually and progressively during the early years and is characteristic of a relatively mature ego.

In the primary process thinking is characterized by an absence of any negatives, conditionals or other qualifying conjunctions; mutually contradictory ideas may co-exist peacefully (representation by the opposite); thinking representation by allusion or analogy (condensation of content); visual, sense impression instead of verbal; no sense of time. This kind of thinking is pathological only when dominant or exclusive of the secondary process.⁸

In the primary process, dealing with the discharging psychic energy is characterized by the tendency to immediate gratification and by the ease of cathexis shift from original object or method of discharge when blocked or inaccessible and instead being discharged by similar or rather different routes.

In the secondary process there is verbalization, syntax, and the capacity to bind and mobilize psychic energy, delaying discharge of cathectic energy until environment circumstances are more favorable. Cathexes is much more firmly attached to a particular object or method

⁸Ibid., pp. 49-59.

of discharge of cathexis. In addition, in the secondary process drive energy which would otherwise press imperiously to discharge as soon as possible becomes desexualized and available to the ego and the ego's disposal for carrying out the various tasks and wishes according to the secondary process.

The development of the human psyche and psychic apparatus is characterized, in psychoanalytic theory, by libidinal flow, that is a flow of libido from object to object and from one to another mode of gratification during the course of psychosexual development, a flow which proceeds along a course which is probably genetically prescribed but which may vary from person to person.⁹

The word cathexis is used to describe the amount of psychic energy or libido which is directed toward or attached to the mental representative of a person or thing during the course of this libidinal flow.

The broad outline followed by libidinal flow is as follows:

(a) from birth to age 1 - 1/2 the mouth, lips, tongue become the focal point for the need for drive gratification. As a result of this gratification by the environment and in order to further it, the ego develops.

⁹Ibid., p. 22.

(b) from one and one-half to three years of age the focal point shifts to the anus where gratification comes in the expulsion and retention of feces. The ego continues to develop and the preliminary development of the superego begins as parents cooperate with the ego (for good or ill) in regulating according to the demands of the environment (for how extensive this is see E. Erikson, Childhood and Society) the need for anal gratification.

(c) from three to six years of age the focal point shifts to the genitals where gratification comes from genital stimulation. It is in this period that the superego develops because the id impulses run head on into prohibition from the environment. Whereas in the oral period almost complete gratification was received when needed and in the anal period gratification was not denied but only governed as regard to timing, in the oedipal or phallic period full gratification is denied by the nature of the outer world, environment. The child, for full gratification, seeks to replace the parent of the same sex and possess for his own sexual enjoyment the parent of the opposite sex. This obviously exposes him to serious danger, the boy to a threatening loss of penis, the girl to genital injury. The id impulse then shifts to the desire to replace the parent of the opposite sex and take their place in the affections of the parent of the same sex. This again confronts the boy with a castration threat (if he is to take mother's place he obviously will have to lose his penis) and the girl with an awareness of her own

inferiority (she doesn't have the equipment to take father's place).

Thus the direct satisfaction of the id impulses must be renounced by the ego and the libidinal flow sublimated into substitute activities which give some measure of gratification to the drives of the id and yet conform with the demands of the environment.

The renouncing of oedipal wishes produces what psychoanalysis calls the latency period where libidinal energy is sublimated into the learning of tasks required for adult living--the person learns to work.

(d) With the onset of puberty libidinal energy again demands direct genital gratification but this time the environment is more favorable (substitutes for parents are available) and the organism more ready for it. As a representative of the environment the superego insists that the ego hold the id impulses in check while the ego works to exploit the environment in such a way as to provide direct genital satisfaction and at the same time avoid unpleasure from the direction of the superego or the present, real environment. The culmination of psychosexual development is according to Freud that the person can love and work, that is he can provide maximum direct gratification for his id impulses and he can sublimate a large portion of libidinal energy for indirect satisfaction and he can neutralize large portions of libidinal energy to invest in the tasks provided by and demanded by his environment.

As can readily be seen, the individual is highly vulnerable

during his prolonged development. The id needs during the oral period may be inadequately met, this means that the emerging ego is weakened. The environment may interfere in very damaging ways during the anal period, further weakening the ego and laying the foundation for a very severe or very weak superego. In the oedipal or phallic period the environment in form of parents may work to produce a very threatening and harsh superego or a very weak and inadequate one, leaving the ego unaided, perhaps already weakened, prey to the overwhelming demands of the id.

One of the ways the individual deals with the dangers of his psychosexual development is through fixation. This refers to the persistence of the libidinal cathexis of an object of infancy or childhood into later life, or fixation to a mode of gratification such as oral, anal, etc. Thus the libidinal flow can stop, become fixated at a certain point in the individual's development.

The libidinal flow can also reverse itself or regress. When libidinal energy is blocked in direct expression, when it cannot find outlet through sublimation, and when it cannot be neutralized, it then reverses direction and in a sense returns to previous stage from which it came, it returns to an earlier mode or object of gratification. Regression is not necessarily bad if the regression works, i. e., the individual becomes stabilized and can achieve some capacity for pleasure and avoid severe conflicts with his environment.

Illness occurs when the individual cannot find ways, because of intra-psychic and/or environmental conflict, to gratify id impulses either directly or through sublimation. Psychosis refers to those illnesses where the ego is severely damaged or destroyed, leaving the individual unorganized and at the mercy of irrational, illogical id drives. Neurosis refers to those illnesses where the ego is intact but in its attempt to defend itself against the id and/or superego becomes severely handicapped or immobile.

Psychoanalytic treatment (as contrasted with theory) attempts to deal with mental illness by providing a situation where the individual can re-enact his psychosexual development and in the process develop a clearer understanding of his id drives, a strengthened ego, and a more realistic superego. In doing this the psychoanalyst makes use of the phenomena of regression of libidinal flow. The person is invited to report without exception whatever thoughts come into his mind and to refrain from exercising over them either conscious direction or censorship. In the process of this "free association" the person on the one hand allies the healthy part of his ego with the analyst while the unhealthy or weakened part regresses to various levels of psychosexual development, sees the analyst as the object needed for gratification, and uses his learned maneuvers of the past to seek gratification. As a result of the lack of response from the analyst, or at least the lack of the kind of response wanted, the person regresses to a still earlier

level of need and desire for gratification.

As a result of the lack of punishment for his various maneuvers to obtain gratification, the suffering and frustration involved in immature needs and forms of gratification, the person gradually comes to the awareness that there are more pressing needs to be met, more realistic and satisfying ways to meet them than he has theretofore known. He gives up his infantile wishes and learns to live more effectively with the needs that can be satisfied in the real world.

The critical psychoanalytic concept for the research in this project is the concept of "transference". The most inclusive definition that I have found is that used by Carl M. Grossman, M.D. :

The mechanism of transference is a universal human psychological characteristic which causes the internalized representation of certain objects--such as parents or parental surrogates from one's infantile past--to be projected onto a succession of later, ostensibly unrelated, persons. The transferring person then reacts to new objects with the anachronistically habitual reactions in adult life that he had toward the originally cathected object in infancy. This is an entirely normal function of the ego, a means of learning, understanding, and adapting oneself to the external world. Like projection, it becomes pathological only when its quantity and intensity preclude realistic evaluation of new objects to distinguish them clearly from the infantile object.¹⁰

The most important aspect (because it is the most often overlooked) of Dr. Grossman's definition is that transference is an entirely normal function of the ego, and a means of learning, understanding,

¹⁰Carl M. Grossman "Transference, Countertransference and Being in Love," Psychoanalytic Quarterly, XXXIV:2 (1965), 249-256.

and adapting oneself to the external world. Transference is only pathological when it excludes reality testing of objects in the present. This aspect of his definition is critical in understanding and demonstrating the value of religious resources as a source of emotional stability and therapeutic change.

Although over-simplified, the best illustration of transference is in man's "falling in love". When a man falls in love he transfers the intense feelings of love he felt for his mother as a small child to the woman of his choice as an adult. As any therapist who does marriage counseling knows, if these feelings are lost in a man, through repression, his ability to stay in love is impaired. This transference becomes pathological only if the man who falls in love by transferring his love for his mother to a new woman demands that the new woman be just like his mother in thought and action or if he acts out impulses toward his new woman which belong to his feelings toward his mother and are inappropriate to his real, here and now relationship with the new woman.

It is pathological because the man is not willing to really "transfer" his love for his mother to a new woman but rather still wants his mother and insists on it by trying to change his new woman into the woman of his past.

CHAPTER III

RELIGIOUS EXPERIENCE AND THE INTERNALIZED FATHER

A. THE PSYCHOANALYTIC "OEDIPUS COMPLEX"

As a result of innumerable hours spent in the treatment of suffering human beings, psychoanalytic, beginning with Freud and continuing with his followers, has discovered that mankind has a sense of guilt for which it can find no conscious reason, but there are unconscious reasons. Psychoanalysis has also discovered that men punish themselves for their guilt without realizing that they are doing so and without knowing why.

This two-fold discovery was made as a result of the analyst's attempt to treat sick people who came to him. In the early days these persons were mainly hysterics, their symptoms were physical ones but with no organic base (a painful arm, paralyzed leg, blackouts). As treatment progressed analysts began to discover that there was some guilt hidden in the minds of their patients for which their physical symptom was a punishment. It was further discovered that when the guilt was found, pointed out, discussed and worked through, the person's illness cleared up.

Although present day analysts have clarified and extended Freud's pioneering work, the basic answer of psychoanalysis to the

question of this original guilt and the need for punishment is found in two of Freud's final works, Totem and Taboo,¹ and Civilization and Its Discontents.² In the former work Freud deals with the origins of guilt in man's primitive, collective historical past and in the latter he deals with the origins of guilt in man's personal unconscious past.

In mankind's primitive beginnings people grouped together in herds under the leadership-dictatorship of the most powerful male. He possessed the females and reigned over the herd. The other males-brothers were left to themselves. Because of their desire to possess the females themselves and replace the leader each brother wished to kill the leader. Because no one brother was strong enough to accomplish the task alone, they all banded together in a common task, murdered the leader and ate his body in a communal meal.

After the meal, however, the love and admiration for the leader which was also present in the brothers returned and with it, a sense of guilt. (Theodor Reik has the best discussion of this

¹Sigmund Freud, Totem and Taboo. (New York: Random House, 1918)

²Sigmund Freud, Civilization and Its Discontent. (New York: Norton, 1960)

dynamic in his section on remorse in *Myth and Guilt*.)³ In addition, each brother now wanted to take the fallen leader's place, but this endangered him in his relationship to the other brothers. What had happened to the leader could happen to the one who aspired to replace him. (If this sounds far fetched, one only has to read current news releases about Middle East politics.) Thus, out of guilt and fear, a totem animal was picked to represent and resurrect the spirit of the fallen leader-father. The totem animal became the god (father) of the tribe and the brothers submitted to him as they had submitted to the slain leader. There was one significant change, however, for now each male had a female of his own and granted the other males females of their own.

Once a year in elaborately prescribed rituals the old primal crime was re-enacted with the slaying of the totem animal and a communal feast upon his body--in his honor!

Thus, to use Freud's words "in the beginning was the deed", not the word. Man's original crime was an act of murder against the father and a cannibalistic meal of his body. The result of his crime was a fear of (because of his own ambition) and need for (because of

³Theodor Reik, Myth and Guilt. (New York: George Braziller, 1957), p. 212f.

his love for the slain leader) punishment.⁴

If this crime, this "original sin" occurred in man's primitive past and was resolved with the creation of the totem-god what connection does it have with modern man and his sense of guilt and need for punishment? Certainly we do not kill and eat our fathers! In Civilization and Its Discontents, however, Freud demonstrates that we have the same problem only in a different way. It is this discovery that Freud called the "oedipal conflict".⁵

In the search for his patient's hidden guilt, for which they were being punished, Freud discovered to his surprise that the small child has exactly the same wishes toward the father that primitive man acted out toward the leader. The small male wishes to kill his father and take his place with the mother. He renounces this wish, not because he wants to, but because he has to, as a result of the obvious fact that father is bigger and more powerful. He does not feel guilty (as is easily observable in small boys under three years of age) about his desire to murder his father because his father does not know about it since he has not acted it out.

⁴Ibid., p. 215.

⁵Freud, Totem and Taboo, p. 28. Each of the above condensed statements represent Freud's position; also Reik's interpretation of "the fall".

Then, a change occurs in the child which is at the same time man's greatest curse and his greatest blessing. Because he is too small to kill the father and because he also loves the father, the child renounces trying to kill his father and instead desires to become like father (out of love and more important, out of the wish to acquire father's power). Through a process too complicated to spell out here, the child incorporates the father into his own personality. The powerful, feared-loved father outside of himself becomes a part of his own psychic structure (internalized father, superego). The child is then able to say to himself, I am not helpless and submissive before an external power, I am the external power, it is now a part of me and I choose to do (and not to do) what formerly I was forced to do (and not to do).

With this change comes civilized man's greatest dilemma. It lays upon him a curse that is a part of his nature, his psychic structure. Whereas before he felt no guilt over his wish to murder his father because his father (outside) did not know of it unless he acted it out, now he does feel guilt and fear of punishment for the father is inside, a part of him and knows not only what he does but what he wishes. Beyond that, the father inside insists on punishment for the wish as if it were the deed! Freud sums this up with the comment:

So it makes no difference whether one kills one's father or not--one gets a feeling of guilt in either case! . . . Whether one has killed one's father or has abstained from doing so is not

really the decisive thing. One is bound to feel guilty in either case. . .⁶

It is decisive whether one has killed his father or not as far as the amount of guilt and need for punishment is concerned. For civilized man can still act out the murderous wish as did the primitive man. The difference is that primitive man acted it out externally, killing the father outside himself. Modern man acts it out internally, killing the father inside himself by ignoring the voice of his father and the voices of wise fathers that exist around him as a part of his culture (present and past). This seems to be what Jesus is referring to when he accuses the Pharisees of killing the prophets. Certainly they hadn't (until they took a hand in killing him) killed a prophet physically but rather by publicly degrading the prophetic teachings and ignoring them in their lives.

This critical shift in man is also a blessing, however, for it means that man can become inner directed, he can become self-disciplined. Instead of always needing external constraint, the man who works through this shift in his psyche becomes controlled from inside. He obeys the law (the wisdom of good fathers) not because he must (because father is bigger) but because he chooses to. He develops an inner consistency that is not dependent on outer authority to

⁶Freud, Civilization and Its Discontents, pp. 78-79.

enforce. In contrast, the man who has not worked through this dilemma (and there are plenty of examples in any church) will appear civilized and moral when under the watchful eye of external controls but will act on impulse when they feel free from external controls.

B. RELIGIOUS DIMENSION OF THE "OEDIPUS COMPLEX"

When one, familiar with the "oedipus complex" as a result of the study of psychoanalytic theory and the practice of psychoanalytic therapy, reads Oedipus Rex for the first time he experiences in a limited way the surprise and pleasure that Freud must have known as it slowly dawned upon him in his treatment of his patients that what was unfolding before his eyes in the analytic hour was expressed in dramatic form in a Greek play over two thousand years ago. It offers one a feeling of comradeship with the family of man through the centuries when the awareness comes that what we are trying to deal with in ourselves and our patients is in continuum with man's search across the centuries to understand himself more clearly and to live more effectively.⁷

⁷Sophocles. Oedipus Rex, Oedipus at Colonus Antizone (Chicago: University of Chicago Press, 1954), p. 19.

The Oedipus drama begins with a sense of guilt and the need for punishment, for Thebes is in the grips of a plague. The plague is interpreted as punishment for an unknown sin and the oracle is asked for assistance. From the oracle comes the first awareness of the more precise nature of the sin: someone lives in Thebes who is the murderer of the former king, Laius, and that person must be found and punished in order for the curse to be lifted off of the land.

Oedipus, who is now king, vows to carry out the punishment, but he first must find the guilty party. Creon, Oedipus' brother-in-law, suggests that Teiresias the prophet be sent for and asked who the man is who has killed the former king. As the plot unfolds, Oedipus comes increasingly closer to the truth that he finally sees fully: He is the man! Out of ignorance he has killed his own father and committed incest with his mother.⁸ He acquires this knowledge by ignoring the warnings of Teiresias, Jocasta his mother and the old Herdsman who had saved his life as a baby. In grief and in guilt Oedipus decided upon and carried out his own punishment, blinding himself and insisting he be cast out of the city to become a wanderer.

Oedipus is both primitive man and contemporary man in the drama. He has actually committed murder of the father in incest with

⁸Ibid., p. 20.

the mother. And yet, at the same time, he is unconscious of what he has done; it was not deliberate and he would have avoided it if he had possessed full knowledge of what he was doing. Primitive man acted consciously, modern man only wishes unconsciously, yet both feel guilty, both feel the need for punishment. Oedipus stands, somehow, at the shadowy meeting place of primitive and modern and yet he is more modern in the sense that he is one who is "stranger to the story as stranger to the deed."⁹

The critical question for this section of the paper is this: Did Oedipus resolve the "oedipal conflict"? The reason for the question and its critical nature both for psychoanalysis and Christianity will become clear in the subsequent pages.

To answer the question, we must look at what constitutes the resolution of the "oedipal conflict" in psychoanalysis. Simply put, the resolution is this, a man renounces his wish to kill the father and identifies with him instead; he renounces his wish to possess the mother and gives her up as a sexual object, accepting a substitute woman, i. e., a wife. (Obviously this transfer is not just a move from physical proximity with the mother to physical proximity with the wife, but involves a deep going emotional shift and involvement.)

⁹Sophocles, op. cit., p. 19.

When we look at the Oedipus drama from this vantage point, we discover that Oedipus not only murdered his father and married his mother (primitive man) but that he continued to actively murder his father (displaced to wise fathers around him) and continued to refuse to give up his mother (modern man). In the initial act he was primitive man, in the attitudes and actions while engaged in discovering the truth about himself and afterwards he was modern man.

It is with Oedipus, the contemporary man, we will concern ourselves here. How did he continue to actively kill fathers? How did he continue to refuse to give up his mother?

The answer to the first question is found in Oedipus' attitude toward Teiresias, the Herdsman and Creon. All three represent good fathers in Oedipus' life. Teiresias was a prophet, wise man in Greece, one whom even the gods consulted. The Herdsman was the man who carried Oedipus away from Thebes to protect him from the prophecy and who saw him safely into the keeping of another. The Herdsman was the man who preserved Oedipus' life after he became king of Thebes by keeping secret his knowledge of how and by whom Laius was murdered. Creon was Oedipus' brother-in-law, from experience a trusted friend, because he "was not born with such a frantic yearning to be a king."¹⁰ Oedipus himself admitted that Creon

¹⁰Ibid. , p. 36.

was equal to Jocasta and himself, "as thirdsman... equal of you two."¹¹

All of these men, in their own way, tried to save Oedipus from a wisdom that would madden him and punishment that would cripple him.

On Creon's advice Oedipus sends for Teiresias to ask for help. Teiresias is obviously a father-figure, one little less than the gods, or as the chorus puts it, "I know that what the Lord Teiresias sees, is most often what the Lord Apollo sees."¹²

Oedipus greets Teiresias with high praise, praise that would have protected Oedipus from himself if he had listened to it.

Teiresias, you are versed in everything, things teachable and things not to be spoken, things of the heaven and earth-creeping things... in you alone we find a champion, in you alone one that can rescue us. (Italics mine.)¹³

Teiresias takes Oedipus at his word and offers to be Oedipus' champion, to rescue him, by saying:

Let me go home. It will be easiest for us both to bear our several destinies to the end if you will follow my advice.¹⁴

¹¹Ibid., p. 35.

¹²Ibid., p. 32.

¹³Ibid., p. 23.

¹⁴Ibid., p. 24.

. . . I will not bring this pain upon us both, neither on you nor on myself. Why is it you question me and waste your labour? I will tell you nothing.¹⁵

Oedipus, however, will not accept the rescue he has asked for, because it is not the kind of rescue he wants. He threatens Tieresias until he finally lets a portion of the dangerous secret out. When he does so, Oedipus is not grateful nor does he ask what he can do about it to save himself and Thebes, but rather turns upon Teiresias and Creon and accuses them of being the ones who have committed the murder and further that they are now out to do him in. Teiresias responds to Oedipus with the words, "So, muddy with contempt my words and Creon's! Misery shall grind no man as it will you."¹⁶

The next critical person to whom Oedipus turns in the unfolding drama is the old Herdsman who had protected him by keeping secret his knowledge of Laius' death. The Herdsman, too, tries to save Oedipus from himself: "O master, please--I beg you, master, please don't ask me more."¹⁷

Oedipus' response is not one of gratitude for the old man's concern, but rather a threat, "You're a dead man if I ask you again."

Because he would not respect the old man's wishes and desire to help, Oedipus learns the whole truth about himself, he comes to

¹⁵Ibid., p. 24.

¹⁶Ibid., p. 29.

¹⁷Ibid., p. 62.

more fully acknowledge his guilt. And once again he asks neither a good father nor the gods for advice or assistance (in contrast to Orestes who asks Apollo for help and Athena for forgiveness!)

Rather Oedipus decides upon and carries out his own punishment by blinding himself. The chorus asks the critical question: "Doer of dreadful deeds, how did you dare so far to do despite to your own eyes?"¹⁸

When Oedipus is finished, he says, "Now I am godless..." (or fatherless!)¹⁹

But still a good father reaches out a hand to help. Creon wants to ask the gods what to do about Oedipus.

Oedipus: "And will you ask about a man so wretched?"

Creon: "Now even you will trust the God."²⁰

But Creon is wrong, for even now Oedipus will not trust the God nor ask for assistance. Instead he tells Creon what he has decided should be done with him and insists that it be carried out. Oedipus says it is because the gods hate him for his crime that he does not consult them, but is it not the other way around, does not Oedipus hate the gods and murder them by ignoring them?

Oedipus appears at the end of the drama aware of who he is, what he has done--he knows primal guilt, original sin--but he has

¹⁸Ibid., p. 68.

¹⁹Ibid., p. 69.

²⁰Ibid., p. 72.

not found healing, salvation. He is still fallen man, he killed his wise fathers by not listening to advice that would have saved him from tragic wisdom, he has killed his wise fathers by not even consulting the gods as to what he should do. He decided upon his own punishment, carried out his own punishment, and left Thebes as a blind man physically and emotionally (spiritually). He did not resolve the "oedipal conflict" for he never renounced his murderous rage toward the father (or he would have listened to wise fathers and/or consulted the gods) nor did he renounce his desire to possess his mother (or he would have found a new wife for himself and mother for his children.)

Ancient Oedipus is regarded as a prototype for modern, psychologically sophisticated man. For often we know (because we have been taught) that we wish to possess our mother and kill our father, but we have not renounced either wish except with our minds. Our hearts and wills are still unhealed, unredeemed, and often not well controlled. We still find it difficult to understand the real meaning of Creon's final advice to Oedipus: "Do not seek to be master in everything..."²¹

It is now possible to make explicit what is implicit in the preceding discussion of Oedipus Rex and the "oedipus complex". A religious implication of the "oedipus complex" is that it offers man an

²¹Ibid., p. 76.

externalized way of becoming aware of and dealing with the "oedipus complex".

In the sacrament of communion man is offered the insight that in his deepest self he is a murderer of God. In the same sacrament he is offered the grace to accept this insight, to make it a part of himself. The God he would like to kill, can through the process of divine revelation, insight and forgiveness become a part of him as friend and guide.

In the sacrament of prayer mankind is offered the opportunity to converse with God, to lay bare all of the secrets of his inner self before the Father, to discover that he is heard, accepted and disciplined but not murdered, and to realize that he is not simply a sinner in the hand of an angry, punitive and unforgiving God.

In the continuing experience in the Christian community and with the Christian gospel mankind is offered the opportunity to discover his true self ever anew, and in reality to test his resolution of the "oedipus complex".

CASE HISTORY NO. 1

This 20-year old, Black single male entered therapy because of drug abuse and mainly the abuse of Phencyclidine (PCP) or "Angel Dust", to use one of its common street names. The patient was actively manifesting such psychotic symptoms as auditory and visual hallucinations, suspiciousness and grandiose delusions of religious origin and content. He had a history of drug abuse dating back to elementary school, starting with glue-sniffing.

This young man was the youngest of three boys and the seventh of a sibship of nine. His father was not at home very often as he attempted to work two jobs. Thus, this patient spent a great deal of his time with his dominant and rejecting mother who had many marital crises with the young man's father who later became a chronic alcoholic, thus developing psychosis with alcoholism. This led to further breakdown of the family system which ended in divorce of the young man's parents. This occurred when the patient was about age 5, which he can only scarcely remember.

The patient's mother was a devout member of a pentecostal church to which she required him and his siblings to attend, often against their will. While the patient seldom saw his father after the divorce, he attempted, unsuccessfully, to identify with older male siblings who themselves were developing into alcoholics and drug addicts and were, therefore, poor role models.

The young man, in search of suitable adult male models, developed a relationship with his rather young pastor of the pentecostal church, who was, in the main, a fairly good model, with the exception that he later discovered that the pastor was having intimate relationships with certain women within the church both married and single. However, this did not seem to cause him loss of respect for the minister to the extent of breaking the needed relationship. The minister was the only significant and suitable adult male model in patient's immediate experience, and one that was essential to beginning any adequate resolution of his identity crisis, which was also presented as a problem which also interfered with the establishment and maintenance of lasting and meaningful relationships with persons of the opposite sex.

Because of the absence of his natural father, due to divorce, during a very crucial psychosexual developmental period of his life, there was a lack of adequate resolution of the "Oedipal Complex".

While a teenager around the age of 16, the patient expressed to his pastor a desire to enter the ministry. So he was ordained at that age (16), which is acceptable in the pentecostal church. His entry into the ministry was regarded as a special gift or blessing from God by the congregation. When he began preaching, he was even more embraced and emotionally and spiritually supported by the congregation. He received affection such as he had never before

experienced and for which he was starving. The kind of nurturing the young man received is one illustration in this case of how:

Religious Experience can be an integral Part of the Person's Psychic Structure and Interpersonal Life.

In the process of therapy it became clear that the patient's unconscious motivation for the ministry was his identification with his caring, warm and affectionate minister and certain other such father and mother figures within the congregation. Yet, he had never realized much of this until during therapy we began talking over his feelings around his relationship with these described significant persons. His ambivalence about staying in the ministry, together with his failure to begin academic preparation for fulfilling this role is attributable to confusion about who he is as a person, who and where his natural father is, and his unconscious desire to displease his rigid and rejecting mother who glories in having a son who is "so close to God". Part of her present disappointment with the patient is the observable fact that he jumps in and out of the ministry, causing her to "look bad".

Part of the psycho-dynamic interpretation in this case is that, in the absence of his father and the opportunity to resolve the oedipal situation, the young man became incestuously attached to his mother, although she was, in many ways, rejecting, and this maternal attachment was displaced onto the church, which was much more

accepting. He had a diminished interest in women because his energy was exclusively wrapped up in the church-mother.

He often expressed that he sometimes had no desire for women in an intimate, sexual way. Such sexual blocking was indicative of guilt over its incestuous beginnings (mother). He worked around the church, under the supervision of his pastor like his mother's cooperative, well-behaved little boy. His father's abandonment and alcoholic condition was almost totally repressed, and there were times that he became quite anxious and "up tight" when questioned about his father. Yet, he later developed a kind of sympathy and empathy for his "lost father" in view of his own experience with his rejecting mother, who often "put him down".

Therapeutic movement, however, lagged for more than six months because the young man could feel nothing concerning his mother, father or girlfriends. He could, at times, talk about his father, but really felt nothing for him except sympathy or pity. He sometimes hinted at wishing his mother was dead, but could not elaborate upon it. Although he lived in the home with his mother, there was much ambivalence about being there. Yet, he is such a dependent character, that he dare "not leave home right now". This very dependency often gives rise to such anger, depression, and anxiety as to cause the young man to become restless to the degree that he leaves home and leaves the city for several days with no plans for

leaving or returning. He ends up calling on his mother and other family members for funds or busfare for returning home. His murderous oedipal wishes expressed themselves in therapy by manifesting no affect for either parent.

The young man can accept the concept of the Fatherhood of God emotionally, but not yet intellectually, and by so doing he has begun to become a man in the image of his "idealized father" and of other good fathers he has come to know around the church. He is now better able to enjoy a woman, with still some ambivalence and distrust, but he has avowed not to get married in the foreseeable future. Finally, the church became a sharing fellowship to serve and be served by, not a rejecting mother with her, now, adorable son.

Religious experience as a source of emotional stability: As we begin by looking at this young man's history in light of the above research question, we discover that his decision to become a pentecostal minister was an attempt through religious experience, to deal with the oedipal struggle. His pathological use of the church as a transference object for his attachment to his mother and his struggle to find his "lost father" is obvious. Moreover, to some degree, his decision to become a preacher was also a positive move toward emotional stability.

Listening to cassette tapes of some of his sermons also revealed that this religious experience as a developing minister also

accorded him the opportunity to cathect and ventilate much pent up anger intended for both parents, but projected onto the world outside. The counter-therapeutic aspect of this type of preaching is that it resulted in guilt for having said harsh things to a congregation who always tried to love and give him emotional support. This preaching style also generated guilt and anxiety within the congregation, which is not the purpose of the Gospel of Jesus Christ. Thus, it is not difficult to see how a sick minister can be dangerous to the mental health of a church or society.

One of the good insights gained by this young man was that perhaps he should not preach anymore for a while until he could "get himself together", a consideration, perhaps, that many a soul-sick religious leader should have in the interest of mental and spiritual health of the community. O, that the late leader of the "People's Temple" cult could have gained such insight several years past! Perhaps more than nine hundred other persons would be alive today. Through insight, this young man was able to look at his oedipal rage. Whether or not he could have gained the insight prior to therapy and its loosening of repressed conflict and rage is difficult to determine. It does seem reasonable to say, based on the young man's overall psychosocial and intellectual development or the lack of it, that he did not have very much to build upon without some external support as the church and as therapy itself. He was a high school dropout at the

tenth grade and a slow learner from early childhood.

The therapeutic relationship produced in the patient enough anxiety to become a therapeutic lever or tool to be used in helping him bring about emotional growth and personality change.

The use of religious experience by the therapist and observing results of such use in the personality integration of the person: Perhaps one of the most important religious images essential to the religious experience of the patient is the pastor-counselor's professional identity. Perhaps one of the distinguishing works of the pastoral-counselor from the standpoint of psychiatrists, psychoanalysts, social workers and psychologists, is his representation of Christian religiosity through his professional identity. In addition to his knowledge of and participation in the worship and fellowship of the Christian church, his sermons preached from the pulpit or in other settings can be and often are of therapeutic value to the patient.

Taking the therapeutic time to listen to taped sermons preached by the patient seems to have done much to elevate his esteem. The patient's daily life had been dominated by depression, anxiety, restlessness and hallucinations together with poor sleep and appetite. But even more than that, he was able to listen to himself more in depth and to deal with much of his own irrational thinking and disconnected thought process. When asked to do so, the writer's honest impressions

of his points were given with some therapeutic interpretation and from which the patient apparently gained some insight. Many statements he made in his sermon, during moments of ecstasy, turned out a bit frightening to the patient himself, and to the point of tears.

Another thing worthy of note is that so long as the patient was actively preaching at a church, the less hallucinating he did during that week or period. And when he did not have opportunity to preach, he would become delusional and sometimes enraged to the point of threatening family members. If, during these periods, he were to abuse drugs such as PCP (Angel Dust) or cocaine with alcohol, he would often become grandiose to the point of believing himself to possess "the power of God". On one such occasion, the patient was noted to have penetrated a sheet-rocked wall. On another occasion, he climbed atop a small building and cast a huge stone upon the automobile of a close relative whom, during this acting out episode, he regarded as an enemy.

The patient often preached about death, dying and immortality. This helped him to think about and talk out feelings around suicide with which he was often preoccupied, and at which he has made two serious attempts.

The young man's father had been a passive, dependent man and later became an alcoholic, leading to alcoholic deterioration. The patient could faintly remember him as a warm, easygoing man who

was almost never angry, but also seldom around. This conscious perception of his father turned out to be an understatement. The transference which occurred during the early weeks of therapy consisted mostly of feelings that the therapist really did not care anything about him. He often remarked "you are just here drawing a salary, you don't care nothing about me. Nobody cares anything about me." He constantly tested and bided for the reassurance he got which set the stage for a meaningful therapeutic relationship.

Religious experience as a source of emotional stability: Observation of the psychic structure of the person actively participating in religious experience. During two therapeutic encounters the patient was asked to recall and describe his behavior in conducting a religious service, including his preaching. He described the mood that came over him as he began to "get happy", and how he began speaking in tongues with other members of the church. He further described the light, warm feelings he got inside himself and how at times he had little control over his bodily movements as "the spirit" took over.

As he talked his affect changed from one of shallowness to one indicating a happy mood. It was like reliving the event. When asked if he saw anything he replied "No, but I can feel the power of God, hallelujah!", he exclaimed tearfully with a smile. He remained in this mood for about five or six minutes after which his affect became more appropriate than when he first entered this session. The sudden

release of emotional energy through ecstatic expression seemed to have therapeutic value in that in addition to producing a more appropriate affect, there was corresponding improvement of thought process.

Church attendance during the week also had therapeutic value to the patient because of the emotional support gained from the rather small congregation together with the repeated opportunity to ventilate emotions and ascribe power to a greater source and figure of paternal power outside the patient's self. This gave the patient less chances to idolize the internal "idealized self-image" which was giving rise to his unrealistic grandiosity.

One of the sermons preached by the patient had to do with the story of the "Prodigal Son", in which he talked especially to young people in the church about the futility of running away from home as opposed to staying near one's family and remaining stable. He noted how easy it was for him to tell others how to live, but did not understand his own restlessness and instability. When asked further what the story of the "Prodigal Son" meant to him, he paused then began identifying with the "Prodigal Son" and putting himself in that character's place. In his projecting he tearfully stated that "maybe the Prodigal Son's parents rejoiced to see him leave home." When asked "Why do you say that?", he stated, "Well I sometimes get the feeling my mother doesn't really want me around. She is only interested in my Social Security disability check." Yet, he could

not back this assumption up with any recalled statement his mother might have made.

As the young man related the portion of the story which tells of the "Prodigal Son's" father welcoming him back home, the patient expressed great hope of being able to welcome his own father back home, but said perhaps that will not work because "my mother is so fussy and bossy."

In a subsequent session with the patient and his mother, each expressed hostile words toward the other regarding their poor relationship. Each blamed the other for the lack of affection that had been shown. Toward the end of the session, they tearfully embraced each other and begged forgiveness for any wrongdoing.

This experience of repentance and confession seemed to have paved the way for a better relationship and his mother made a contract to allow the patient the kind of freedom and trust he had been bidding for for many years. While the conflict and pathological dependency is not fully resolved, partly because his mother is in dire need of psychotherapy, herself, the patient has manifested tremendous growth since intake, he is less often grossly and overtly psychotic requiring hospitalization, and he has begun to make realistic goals for himself, such as completing his education and dating young ladies. In initiating the termination process, the patient decided that he had been helped and is now in less need of intensive weekly therapy. Toward the middle

of the termination process, it was mutually agreed that, maybe, monthly sessions would be useful until some of his basic goals are more fully realized.

It is noteworthy that in this particular therapeutic setting, a public, secular mental health treatment facility, the patient is unaware that the writer is an ordained minister. In this setting he carries out the role of a traditional psychoanalytic psychotherapist and psychiatric social worker.

Paragraph 18, page 59 of this case illustrates: Observation of the change in the person when religious resources are withdrawn.

CASE HISTORY NO. 2

This case illustrates: Observation of the use a person makes of religious experience to aid her in personality change and reorganization:

A fifty-one year old, Black, married, mother of three children entered therapy, after being discharged from a psychiatric hospital following several recurring psychotic episodes. After much long-term resistance to ongoing outpatient psychotherapy, she became motivated to pursue it in the face of possibly losing her beloved husband, by divorce, if she failed to "get help". Incidentally, her husband is a minister of a Baptist church. The patient, herself, had grown up in the church from childhood.

She was the oldest of a sibship of three half siblings, was born to a mother whose health was failing at the time of patient's birth. Her father abandoned the family when she was two years old and she has seen her father only once (at age 17) since that time.

The woman's mother died when she (patient) was eight years old. This was a traumatic experience for her. She was then reared by rigid and rejecting grandparents who later died during the latter period of her adolescence, which caused her to marry her first husband at the age of seventeen. This turned out to be quite a bitter

marriage and of short duration, which intensified her distrust and ambivalence for men, starting with her father who "left her mother sick and flat on her back," according to her mother's account.

It was several years, thereafter, before this woman could begin to trust another man, although she dated several "guys" off and on, but could take none of them seriously. At age twenty-three, she met a minister who was twelve years her senior. They dated for almost two years and decided to get married because he is a "nice, kind man."

Although she has always looked upon her husband as such a "nice man", she finally admitted that he has never been a good lover, but a good provider. She continued that she did not mind whether he could have sex or not and that she could and did go without sex for many years. Moreover, she resists discussing the subject of sex in the therapeutic setting.

This woman often mentions that she used to be mean, quick tempered and sometimes violent. Time was when "she would cut or stab a person, especially a man, if necessary." She often talks about how her life has changed since she has married her current husband and gotten "so close to Jesus". It is as if her personality has changed from aggressive to passive. Although she now poses as a nice and kind softly-spoken person, she does not hesitate to point out that she could "cut a person all to pieces," if he would take advantage of her.

She states that being married to her husband and being close to the Lord helps her to keep her temper under control.

While she is under fairly good emotional control where her temper is concerned, the patient's daily life is dominated by symptoms of depression, anxiety, somatic complaints, and other histrionic and conversion symptoms. Additionally, she has auditory hallucinations almost daily. She does not feel like doing any work around the house, but boasts about having her children, husband and members of the church to do things for her. She has changed from a very active and independent young woman to a middle-aged dependent character, for which she has no conscious guilt. The hostile dependency is manifested by her chronic demands for goods and services for which she is not overly grateful. She triumphs over being able to manipulate persons close to her into doing what she wants done.

While this woman is more psychotic than neurotic, her personality has become somewhat changed and reorganized mainly due to her faith in her husband who represents her lost father toward whom she is ambivalent and because of which there is sexual blocking due to the incestuous relationship with the father-husband, and because of her increasing faith in God, the internalized "idealized father and self-image" who has given her "good husband"-father a good job as a pastor. The patient often recalls her mother's account that her natural father was "no good" and refused to work and care for the

family. The patient had also been told that her natural father refused to give her mother money for milk when she (patient) was an infant.

One might say that this patient is making use of her relationship with the church and her husband-father in two ways: (1) to effect change, reorganization and stability of her personality, which is the healthy part of this experience; and (2) to manipulate her husband-father and elders of the church into doing things that will facilitate infantile gratification and to give her the opportunity to punish her husband-father and representative parental figures of the church by the establishment of a passive-dependent relationship with them; also allowing her to shift the care of her unworthy self onto an unloving world, which is pathological and one of the main therapeutic problems which are inhibiting a more complete personality change and reorganization.

Her pathological need to depend upon such external objects as her husband-father, other persons and medications provide the psychological framework for developing the kind of ultra-dependent relationship upon God, which she perceives as essential to lasting religious faith. But even in this relationship, the patient is not committed to doing, but to receiving as a worshipper, which is not the role of a more matured Christian follower. It is, therefore, anticipated that her growth as a Christian believer and practitioner will take place in proportion to her psychological maturity. Her prognosis

is now more hopeful than when she first entered therapy.

CHAPTER IV

RELIGIOUS EXPERIENCE AND THE INTERNALIZED MOTHER

A. THE PSYCHOANALYTIC "ORAL STAGE OF DEVELOPMENT"

In psychoanalytic therapy later stages of development are analyzed first and it is only after a great deal of time and effort that the analysis can "regress" to the earlier stages of development and the conflict connected with them.

Just as it occurs in the analysis of an individual that one moves from later stages to earlier stages, so psychoanalysis as a science has moved from investigating a later stage (the genital stage, the Oedipus Complex) to investigating the earliest stage, that of the relationship with the pre-oedipal mother (the oral stage).

Interestingly enough, psychoanalysis has developed a clinical term for the genital stage of development (Oedipus Complex) but has not developed a corresponding term for the oral stage of development.

In this dissertation we will use the term "Orestes Complex" to describe the oral stage of development. Although the reason we have picked this particular term to describe the dynamics of the oral stage of development will become clear in the following pages, it can be pointed out here why a description of this nature is necessary at all.

The necessity for such a term becomes clear if we look first at the later genital stage of development. It is necessary to describe

the triangular relationship between son-mother-father as the genital stage because this roots the dynamics of this triangular relationship in the body. However, to stop with this description leaves the richness and importance of the genital stage for adult life untouched. Thus Freud drew upon Greek literature for a much more descriptive term, the Oedipus Complex.

The same is true of the oral stage of development which precedes the genital stage. To stop with the term, "oral stage" leaves the richness of this stage and its crucial importance for later life unexpressed. Thus, we will use the term "Orestes Complex" to describe this first stage in mankind's life journey.

It is important to emphasize that psychoanalysis is in the midst of its exploration of the relationship with the pre-oedipal mother and this investigation has produced much controversy among the psychoanalytic workers themselves.

For example, Melanie Kline, Edmund Bergler, and Bertram Lewin, whose pioneering work in this area has provided the foundation for later research, were received with great skepticism and even outright rejection when they began to publish their findings.

Although there is evidence Freud began to understand this first stage of human development in his final years, he did not

explore its depths in the profound and detailed way he explored the Oedipus Complex.¹

There is, in Freud's last works, a struggle with this issue but it remains confused. For instance, in Totem and Taboo, Freud indicates that the first great crime of mankind is the murder of the father by the sons because of their desire for the females. In his discussion of this first crime, he explores the cannibalistic feast connected with it but includes the feast as a kind of secondary elaboration of the murder.

Theodor Reik in his book Myth and Guilt tries to pick up where Freud left off and goes further in understanding the first crime. And though Reik approaches the true nature of the first crime (especially in his discussion of "remorse") he, too, remains fixed at the genital level, i. e., that the first crime is the murder of the father.

This difficulty in getting behind the Oedipus Complex to the Orestes Complex is indicative of the amount of prohibition and repression that surrounds the first stage of our development which takes place in the pre-verbal shadows at the beginning of life. It takes only a simple step in logic from our position in psychoanalytic history to see that the "first crime" could not have been at the Oedipal stage,

¹On the above two points see the introduction and first two chapters of Edmund Bergler The Basic Neurosis (New York: Grune & Stratton, 1949)

because that is not our first encounter. Our first encounter is in the Orestes stage (oral stage); it is pre-genital and pre-sexual, and for a man has to do not with penetrating the woman genitally but with incorporating her, devouring her and being penetrated by her (breast).²

What then is man's first crime for which he feels guilty? In discussing the answer we can follow Freud's own approach in Totem and Taboo and in Civilization and Its Discontents, i.e., discuss it as a social phenomena in our primitive collective historical past and then as a psychic phenomena in our personal, unconscious past.

Cultural anthropologists have put at our disposal findings that were not available to Freud. Basically these findings are two-fold: the first sacrifices were women; the first gods were frightening female gods (for example, the female god Kali in India).

If we approach these findings in the same way Freud approached the primitive religion of a later stage, we can make three deductions: (1) the first murder was a murder of the woman-mother (the fact that the sacrifices were young maidens fits with the way men represent their mothers in their unconscious world); (2) the first cannibalistic meal was a feast upon the murdered mother; (3) the murdered and devoured mother was resurrected as a god who prohibited the murder

²See Bergler's "septet of baby fears", in Ibid.

and the cannibalistic meal and yet provided, through religious ceremony, its periodic re-enactment.

It is beyond the scope of this paper to demonstrate the above speculation by extensive research into primitive cultural anthropology. The above is offered only as a parallel to Freud's exhaustive work on the Oedipal stage in Totem and Taboo. The burden of clinical evidence will be offered in the second area, our personal, unconscious past.

In discussing the Oedipus Complex as a present conflict in the unconscious of man, Freud makes the critical comment,³ that although man does not literally kill the father and possess the mother, he still has the impulse to do so, and as a result feels guilty and in the need of punishment.

Just so with the Orestes Complex. Although man does not literally kill the mother and devour her body, he has the impulse to do so and thus feels guilty and in the need of punishment.

When the core problem of the Orestes Complex is put this bluntly, it is easy to see one reason why it is in the stage of our development which is most surrounded with prohibition and repression. Certainly our conscious, civilized minds are horrified and offended by such a suggestion. (Freud himself made the comment that cannibalism was the one impulse mankind had outgrown.) Our conscious

³Supra, p. 23.

minds find it hard enough to accept the possibility that we have an unconscious impulse to kill our fathers and marry our mothers. But even that is not as offensive or repulsive as the possibility that we want to devour our mothers which is both the murder and the feast.

There is a second reason that makes this first stage of our development difficult to accept and difficult to explore, however. The Orestes Complex unfolds in the first year and a half of life, a period that is pre-verbal, pre-conceptual and even more difficult, a period when there is no distinction in the psyche between inner and outer reality.⁴

In the inner world of the infant, the world is perceived as one; there is no split between outside and inside. The nursing baby experiences the relationship both as the mother who is nursing (being devoured) and the baby who is nursing (devouring). Notice that the word itself indicates this monism of the infant world, for we can use the word nursing to describe either the mother's activity or the baby's activity.⁵

This lack of distinction between subject and object, outside and inside, can be seen even at the age of two, when a child begins talking. Many two-year-olds will say to a parent, "me carry you" when they

⁴Bergler, p. 2f.

⁵Rene Spitz, The First Year of Life (New York: International Universities Press, 1965), pp. 13-14.

really mean, "you carry me".

We are now ready to construct in a more precise way the dynamics of the "Orestes Complex".

In the mother's womb, if it could talk and were consciously self-perceiving, the developing fetus would say that he provides for himself, out of himself. This perception of the universe continues after birth and during the early months of the infant's life (0 to 6 months). There is no perception of separation, the infant is omnipotent, he has everything.⁶ In his omnipotence, the infant provides for himself, out of himself. The breast from which comes food and the relief of tension, is seen as an extension of himself.

As the months pass (6 to 18 months) the infant begins to perceive that the good which comes to him, which is the very foundation of his life and without which he would perish, is beyond his control. The good is in the control of another. Beyond that, she who controls that good is a giantess who holds the power of life and death over the helpless infant.

Ideally, the infant learns through repeated experience that the good which is beyond his control is reliable. He experiences hunger, he cries and the hunger is satisfied. He experiences uncomfortableness from feces urine, he cries, and the uncomfortableness is relieved.

⁶Bergler, pp. 2, 51.

Gradually there develops on the one hand an accrued sense of confidence in his ability to seek out the good and on the other hand the ability to have confidence in the reliability of the good itself, i. e., it will not disappear forever and he can have some effect on its presence and absence.

In the process two critical impulses (appetite-cannibalism and rage) come under control. When the baby is hungry for the mother, he experiences the wish to devour her. If she appears, feeds him, and holds him, he experiences relief and is at peace. The wish to devour does not build up to an overwhelming intensity. At the same time the rage felt during the period of frustration (that time between the infant's awareness of need-tension and the mother's response to that need) does not reach overwhelming proportions.

It is important to emphasize that every person comes to adult life with a residue in the unconscious of the wish to devour-murder the mother, even where mothering has gone quite well during these critical first months. The devouring-murderous impulse and the connected fantasies remain repressed and are held in check by the past experiences of dependable, external goodness and the continuing experience of goodness (in personal relationships, work, etc.).⁷

⁷It is because of this residue in the unconscious, for example, that "normal" people can become "abnormal", expressing fears of being swallowed up by the communists, big government, etc., and can become destructive toward that which they fear.

As the infant begins to become aware that the mother is outside himself, he experiences that mother in two basic ways. (1) He experiences her as the "good" mother, the mother who gives, who sustains, who fills, who satisfies needs (basically, one who gives life.) He responds to this experience with kindness, gratitude, the wish to preserve that which sustains him. He feels "peaceful". (2) The infant also experiences the mother as the "bad" mother, the mother who is not there, who deprives, inflicts pain by her absence (basically, one who threatens death). His response to this experience is one of frustration, rage, the wish to destroy-devour that which threatens to destroy-devour him. He feels helpless, threatened with death.

In the infant's "world" there is no connection between the good mother and the bad mother. He can at one time be grateful for the good mother, and at another time be angry at the bad mother. He has no perception that the "two are one".

The best evidence of this split comes from observing a baby who has experienced an extended period of deprivation and is crying in rage. When the "good" mother arrives to relieve the tension through feeding or changing, the baby refuses to accept her. He will, in rage, refuse the offered breast or bottle, he will fight the attempt to change him. He wishes to destroy the "bad" mother who has left him in such pain and does not perceive that she is now the "good" mother who wants to

bring relief.

This split is resolved as the infant develops an accrued sense of trust in the mother's basic dependableness and as a result learns that he cannot destroy the "bad" mother without losing the "good" mother as well.

For the sake of clarifying a very difficult dynamic, it is helpful to add a clinical illustration at this point. In the illustration we can see the dynamic discussed above at work in the experience of an adult.

The illustration is of a woman whose mother for the past four years has been practically bedridden, who controls the family in this way and has for many years, and whose house literally looked like a pig pen during her daughter's growing up years.

One night this woman asked her husband what he thought about her. The husband answered, "You are lax with the children; you don't keep the house well; you are sloppy with yourself." All of this was true. Her immediate response was to leave the bedroom where they were talking and to refuse her husband's efforts to give her his love and affection. Although what he had said was true, he genuinely cares about her. She could not accept his love, however.

When he left for work the next day, she was haunted all day long by the impulse to cut her throat. The desire to commit suicide was an expression of rage and hostility toward her mother whom she

now felt she was like. What she was saying in her desire to commit suicide was: "If I am like my mother (bad), then I should have my throat cut." Her wish to cut her throat is murder, the wish to kill the bad mother whom she hates.

We see clearly here how the rage toward the "bad" mother produces in the person the impulse to kill the mother, which means killing the "good" mother also.

An additional impulse this woman had was to give up her singing. Her mother had encouraged her singing and taken great pride in her ability as a soloist, which was considerable. Because of her rage toward that in her mother which she hated, she was tempted to destroy or give up a gift which had come from the mother she loved.

In the midst of her despair and suicidal thoughts, however, thoughts of her own daughter and son came to the woman. For their sakes she had to stay alive. The thoughts of her own children resurrected within her the good mother. The awareness came to her that if she killed the hated mother, if she slit her throat, it would also kill the good mother and deprive the children. For the sake of her children she could see what she did not see for her own sake. She saw that for the sake of what is good she must control her desire to destroy what is bad.

In summary, the achievements of the oral stage of development are as follows:

1. acceptance of the fact that "goodness" is outside oneself;
2. the ability to trust that "goodness" is basically but not perfectly dependable;
3. acceptance that the "good" mother and the "bad" mother are one person;
4. willingness to accept the "bad" mother without becoming destructive, in order to preserve the "good" mother;
5. acquisition of an accrued sense of goodness inside (there is good in me, I am good) which one can draw upon for a time when goodness is absent outside.

Obviously these achievements are not finalized during the first two years of life, these dynamics continue throughout life. The first two years are critical, however, as the foundation for the rest of life, and remain in the unconscious for good or ill throughout the person's life experience.

The successful living through of these dynamics in infancy plus their re-enforcement in the subsequent years produces important ingredients for adult life. It provides the ability to accept one's dependence on others and one's need for the care of others. It provides the ability to reach out to others for caring and to trust that they will respond, but without the demand that they be perfect in their response. It provides the ability to bear frustration without giving up hope. It provides the ability to care for, to nurture and to offer goodness to others without becoming destructive if it is refused or, if it is not offered in return. It provides a trust in one's self, in one's own goodness that nurtures the person in aloneness without creating the need to fixate on aloneness as a way of life.

If these dynamics are unsuccessfully worked through in infancy and the following years, serious conflicts result for the individual himself and for those around him. A person reaches adult life with the feeling that life is empty and meaningless and that goodness is an illusion. A person feels consciously or unconsciously that he is "no good", contemptible.⁸ A person makes aloneness a way of life, accepting goodness from no one. He may at the same time refuse to be of any good to others or he may be good with a vengeance, "killing people with kindness".

All of these basic conflicts arising from an inadequate experience during the oral stage of development can be summed up in one basic neurotic solution, psychic masochism.⁹ Instead of seeking to avoid displeasure and to seek pleasure the person (as a result of frustration, rage and helplessness) reverses himself and takes pleasure in the displeasure of his situation. He enjoys his suffering. This reversal takes place unconsciously, but it nevertheless has far reaching effects in conscious, adult life.

⁸A fellow social worker in Watts reported that on several occasions he has seen two and three year old Black children spit at their own image in the mirror and turn their backs. It was the parents of such children who rioted and in the process destroyed their own neighborhood.

⁹Bergler's book, The Basic Neurosis, is devoted to a discussion of psychic masochism. The following section is a summary of Bergler's basic position.

By making displeasure into a pleasure, the person rescues his infantile omnipotence. It is not that the good is beyond his control and that he is helplessly experiencing displeasure, but rather that he takes pleasure in his displeasure and he "arranged" the present experience. Thus he avoids the overwhelming anxiety of hoping for what never comes.

If this sounds rather farfetched, perhaps the following clinical illustration will demonstrate its reality. Early in his counseling relationship, a patient told of how he would often as a child, go out and sleep on the woodpile "despite" the fact that it was extremely uncomfortable. Neither the counselor or the patient understood what this meant. Several months later, the patient recalled being told that when he was an infant his mother was ill and confined to bed. His father was out of town during the week and home on weekends; so a woman was hired to take care of the baby. When the father returned home on a Saturday, he heard the baby crying. The father went to check on him rather than waiting for the woman to go. He found that the baby had not been changed for several days and that his rubber pants had produced a deep cut in his leg, the scar of which is still there. If one equates laying on hardened feces with laying on a woodpile, we see clearly how this baby rescued his omnipotence and avoided his helplessness by making a pleasure out of displeasure.

As the infant develops he internalizes, for better or for worse, the parents of his infancy. They become a part of his own psyche in the form of the superego. The child substitutes an inner parent for the outer parents of his infancy. The superego contains both the ideals of the parents and the experiences with the parents so that the superego expects of the ego what the parents expected of it and treats it as the parents treated it. For the orally deprived child who has unconsciously made displeasure into a pleasure, adult life then becomes a continuation of the tragedy of infancy.

The superego continues to inflict punishment and deprivation upon the ego and the ego continues, unconsciously, to take pleasure in this cruel treatment. The superego uses the ideals of the parents as an excuse to continue the cruelty of the parents. An impossible ideal is held up before the ego, the ego is accused of failing and then punished. (One is reminded of Jesus' comment that the law kills, but the spirit gives life.) The superego of the orally deprived adult uses the law to kill the spirit (ego) and despair is the price one pays for setting oneself an impossible aim.

Finally, the orally deprived adult is an active participant in his own misfortune. Because he unconsciously takes pleasure in displeasure, the orally deprived adult constantly provokes life in various ways in order to bring displeasure down upon himself. Consciously he may feel aggressive, unfortunate, sorry for himself, mistreated.

Unconsciously he enjoys the suffering he has brought upon himself.

B. RELIGIOUS DIMENSIONS OF THE "ORAL STAGE OF DEVELOPMENT"

The reason that "Orestes Complex" was used in the preceding pages to describe the dynamics of the psychoanalytic oral stage of development is because of the conviction that just as we see the dynamics of the genital stage expressed in the Oedipus plays of Sophocles, so we see the dynamics of the oral stage expressed in the "Orestes" plays of Aeschylus.¹⁰ Further, we can demonstrate the religious dimension of the oral stage of development in the discussion of the "Orestes" plays.

When we approach the real crime for which Orestes feels guilty in the "Orestes" plays, we find our task more difficult than it was in discussing the "Oedipus" plays. In the "Oedipus" plays the dual crimes of patricide and incest are quite obvious. In the "Orestes" plays the crime of matricide is obvious, but the underlying dynamics, i.e., oral (cannibalistic) rage toward the depriving mother, are not obvious. If the real crime for which Orestes feels guilty is cannibalism-rage, we must demonstrate its presence from secondary evidence in the plays themselves. In this instance we will work with the plays in the same

¹⁰The three Orestes plays are: The Agamemnon, The Libation Bearers, and The Eumenides.

way we work with dreams in psychoanalytic therapy, starting with the manifest (obvious) content and then moving to an analysis of the latent (hidden) content.

If we start with the manifest content of the plays, we find a series of crimes leading to the crime for which Orestes is guilty, the murder of his mother, Clytemnestra. Orestes kills his mother because she has killed his father, Agamemnon. Clytemnestra has killed Agamemnon because he killed their daughter, Iphigenia, and sacrificed her to the goddess Artemis in order to secure favorable winds for the Greek armada in its battle against Troy. In addition to this motive, Clytemnestra is also urged on to the murder of Agamemnon by her paramour Aegisthus. It is here we move toward a discovery of the latent meaning in the plays. Interestingly, Aegisthus' motive is not incestuous, i. e., he does not want Agamemnon murdered so he, Aegisthus, can have Clytemnestra. Aegisthus' motive comes out of the past and leads us to the crime of cannibalism. Aegisthus wants Agamemnon killed in order to avenge a crime that Agamemnon's father (Atreus) perpetrated against Aegisthus' father (Thyestes). Atreus had served Thyestes his own children to eat at a banquet. Aegisthus had been the only child to escape. In his speech to the chorus, Aegisthus indicates that here was the real motive for Agamemnon's death, the real reason that Agamemnon was guilty, when he says: "I was the one who sewed this murder up--so rightly I:

Third child of my unhappy father, banished with him--A little thing in baby clothes.¹¹

Thus, we discover that the crime which set in motion the subsequent crimes including Orestes' was the crime of cannibalism. Clytemnestra indicates that this is so when she says:

You protest the work is mine. Why not pretend
I'm not Agamemnon's
Wife, but the ruthless ever-old wicked
Spirit of Atreus, barbarous feaster,
Adopting the semblance of corpse's consort
To pay him with primest of victims
The price of babies dead?

Oh, now you set right your opinion
In branding the family ogre--

¹¹ Aeschylus, The Orestes Plays (New York: New American Library, 1962), pp. 94-95. Aegisthus' total speech is an excellent summary of the real reason for the guilt in the Orestes plays:

For Atreus, lord of this land, his father,
Being challenged by Thuestes,
My father and his brother

...

Drove him from his city and his home.
Then Thyestes, sad, came back,
A suppliant at the hearth,
And found at least this mercy:
That he himself was not to die--
Not splash his death upon his native plot.

But Atreus-godless father of the dead man here--
Outstripping even love in welcome,
Pretended a day of celebration for him:
A great dinner to be carved--
Meat of his own children.
And sitting apart,
He severed first before he served it

Thrice-gorging with lapping of blood,
Hankering deep in their flesh.¹²

In its response to Clytemnestra, the chorus reminds us of the monism of the infant world where there is no distinction between subject and object.

So rebuke has come to return the rebuke!
Difficult too to decide:
Looter is looted, killer is killed;¹³

Just as in a dream, the play presents an obvious reason for Orestes' crime (the murder of Iphigenia by Agamemnon and the murder of Agamemnon by Clytemnestra) and yet discloses upon closer

The toes from the rest and the comblike crest of fingers.

My unwitting father
Took those unsuspecting parts and ate--
Meal so poisonous, as you see, for all his race.
Then discovering what he'd done,
He made a cry, reeled back, spewed out the butchered mess,
Kicked the table over in a curse,
Bellowing out abomination on the House of Pelops:
"Go down so--in ruin--you total race of Pleisthenes."

The consequence you see here:
This man stretched out.
I was the one who sewed this murder up--
So rightly I: Third child of my unhappy father,
Banished with him--A little thing in baby clothes.

But I am a grown man now. Vengeance brought me back.
I put the touch of death on him though far away,
Piecing together the final stratagem. And now,
Death itself I could find sweet,
Seeing him fast at last in judgment's widening sheet.

examination that the obvious reason is not the real reason. The real reason is a hidden impulse, a hidden "ogre" that haunts the whole family, the impulse of cannibalism, "Thrice-gorging with lapping of blood."

The best summary of the nature of the real crime of which Orestes is guilty comes from the final "Orestes" play, The Eumenides. The furies who are pursuing Orestes to punish him for his crime, define the crime itself when they describe Orestes as "the house pet (who) has turned and taken a bite out of love."¹⁴

But why does Orestes have the impulse to devour-murder his mother if her murder of Agamemnon is not the real reason? "I reared you up from babyhood," pleads Clytemnestra, "Oh, let me grow old with you." Orestes answers the question in his own words, "You gave me birth, then flung me out--to misery."¹⁵

Here is the real reason for Orestes' cannibalistic-rage, he had to give up oneness with mother, accept that she was outside of himself, and ultimately be weaned from her. Here is the dilemma that every man faces in his personal unconscious. Because mother, the source of good, is outside of himself, he wishes to devour her, which is at the same time a wish to murder her for being outside and

¹²Ibid., pp. 89-90.

¹³Ibid., p. 92.

¹⁴Ibid., p. 174.

¹⁵Ibid., p. 145.

a wish to get her back inside, i.e., recover the omnipotent position of the infant world.

This murderous-cannibalistic view of infant orality is expressed with striking clarity in Clytemnestra's dream, reported by the chorus in conversation with Orestes:

She fancied she gave a serpent birth.

...

She tucked it up in baby clothes as if it were a child
and when the little horror wanted food,
in her dream she offered it her breast.

Orestes:

How did it not gash her nipple, such a ghastly thing?

Chorus:

It did. Clots of blood it sucked in with the milk.

Orestes:

No empty dream. This vision means a man.

...

I turn snake to murder her.
That is what this dream forebodes.¹⁶

Orestes finally encounters Clytemnestra face to face, under the guise of a stranger from another city. His mother greets him with warmth and offers him the hospitality of her house:

Friends, you have only to declare your needs.
A house like ours has everything:
hot baths, beds to charm away fatigue,
and eyes laid out to please.¹⁷

¹⁶Ibid., pp. 129-130.

¹⁷Ibid., p. 134.

Orestes wavers from his wish to devour-murder: "I--I could have wished with hosts so bounteous to have been introduced and welcomed as a herald of some happiness."¹⁸

At the time of this initial encounter another mother figure appears in the play, Cilissa, Orestes' nurse of childhood. In her speech she indicates that she has nursed Orestes from "the moment he was born". But this contradicts Clytemnestra's words, "My baby, soften towards this bosom where so many times you went to sleep, with little gums fumbling at the milk which sweetly made you grow."¹⁹

If we look at this contradiction in light of our understanding of the unconscious, however, the puzzle is solved. Clytemnestra and Celissa represent (in the unconscious world) two sides of the same woman-mother, but they are split off into bad mother (Clytemnestra) and good mother (Celissa), and are not seen as one person.

Just as in Orestes' anger toward Clytemnestra and Clytemnestra's behavior toward Agamemnon we see the bad mother, so in Cilissa's speech we see the good mother:

I've never had a blow like this before.
I put a brave face on all those other setbacks, but--
my darling Orestes whom I wore my soul out for...
had him from his mother, nursed him the moment he was born--

¹⁸Ibid.

¹⁹Ibid., p. 144.

oh, up all night with his crying, so loud and so demanding.
 And the little nuisances put up with ...
 A baby's got no sense all; just like an animal:
 it has to be nursed--of course it must!--and humored too.

It can't say a word, wee mite--all wrapped up in baby clothes--
 whether it's hungry or thirsty or wants to wet ...
 children's little new insides just work the way they want.
 But I could tell all right; though many's the time I've missed
 (I should think so!) and had to wash the baby's linen out
 and turn myself into nurse and washerwoman all in one.
 It was a double job I got when I took Orestes from his father....
 And now I'm told he's dead. And I am so unhappy....²⁰

Orestes has no contact with Celissa, however, and she does
 not appear again in the play. His whole attention is focused on the
 bad mother and his rage toward her.

Finally, Orestes reveals who he really is, murders Aegisthus
 and then turns to Clytemnestra: "You're the one I'm looking for."
 Clytemnestra pleads with Orestes not to kill her, reminding him that
 she had given him birth, nursed him at her breasts, held him warmly
 while he slept. Once again Orestes wavers, asking his companion,
 "What shall I do? Weaken and not kill my mother?" The friend
 (Pylades) urges him to go ahead and adds an interesting comment
 which we will return to later: "Make the world your enemy but not
 the gods."²¹

Orestes' momentary ambivalence between his love for the
 good mother and his rage toward the bad mother is overcome and he

²⁰Ibid., pp. 137-138.

²¹Ibid., p. 144.

turns to Clytemnestra with the words: "Come here. "I'll drop you slaughtered. . ."

Clytemnestra:

Your heart, it seems, my son, is set on
murdering a mother.
So you are the snake I bore and gave my
breast to.²²

When Orestes emerges from the murder room he is momentarily freed from conflict:

And the spell that made me dare so much
I owe to Loxias the Prophet,
whose oracle declared
that if I did this thing I was beyond the reach of blame,
but if I slighted it,
no arrow from a bow could touch such peaks of agony.²³

The freedom from conflict does not last long, however. The furies (goddesses of vengeance) arise from the murder scene. They are "like Gorgons draped in black, teeming with their serpents knotted." Orestes is overcome with panic:

As clear as day I see them: my
mother's foaming pack.
Lord Apollo! . . . Now they crowd on me,
distilling blood-drops from their eyes, hideously.
You do not see them. But I see them.
I am driven, driven--I cannot stay.²⁴

For the sake of clarity, we can now summarize the foregoing pages in psychoanalytic language. Orestes is enraged because the good mother is outside of himself and is not under his control. He

²²Ibid., pp. 144-145.

²³Ibid., p. 151.

²⁴Ibid., p. 152.

wishes to devour her, which is at the same time a wish to destroy her for frustrating him and a wish to get her back inside (restore infantile omnipotence). Because of his rage he does not perceive that the bad mother he hates and the good mother he loves and needs are the same woman, and in the act of murdering the bad mother he destroys the good mother. He is left alone with nothing. More important his rage is now internalized in the form of the superego (furies) and instead of being the murderous hunter he is the hunted victim. He is driven to flight because of his fear of the internalized mother who now pursues him with the cannibalistic rage with which he pursued her. He could not in the early part of the plays find goodness because of his rage toward the bad mother. He cannot, now find goodness because of his fear of the bad mother.

The chorus closes this part of Orestes' experience by saying:

So has the third of these tempests raged
all through the kingly halls;
blown itself past and into seed.
First to come was that grisly feast
of man-eaten children.
Next to break was a king's catastrophe:
stabbed in a bath he went to his end,
ward-lord of Hellas.
Now shall I say the third has come:
savior or is it
nemesis?
Oh, when shall it finish, when shall it sate--
lie down to sleep--this fury-bound hate?²⁵

²⁵Ibid., p. 153.

Orestes leaves the city in the condition which Bergler calls psychic masochism. The chorus offers him goodness (commendation for ridding the city of "two dragons", and an invitation to stay and rule but he refuses. Instead he chooses displeasure, leaves the city to be "an exile from this land, a vagabond, this fame of mine--in life and death--I leave behind."²⁶

The furies (super-ego) insist that Orestes' life will continue this way:

Not Apollo, not all Athena's power,
can snatch you from abandonment
and ruin: a spirit absolutely ignorant
of joy (*italics mine*)--bloodless fodder for
the demons; and a shade.

...
Sweet victim fattened for me!
Banquet all alive-oblated at no altar!²⁷

Thus, after the murder, Orestes is in the same condition as before, only the direction of the cannibalistic-murderous impulse has changed. Before it was directed outward toward the mother, now it is directed inward toward Orestes. But in both cases goodness is destroyed, displeasure and pain is nurtured. When he wavered in his decision to kill his mother, his friend advised it was better to have the enmity of the world than of the gods. His friend was wrong--he ended up with both.

²⁶Ibid., p. 151.

²⁷Ibid., p. 172.

Here in these ancient plays we can see contemporary man's predicament--whether he acts out the impulse or only wishes to act it out, he is guilty just the same, because the hated person is inside and insists on punishment for the thought as well as for the deed.

As we approach the discussion of Orestes' struggle to resolve the problem of matricide--cannibalism, we come to an important difference between the Oedipus plays and the Orestes plays. For while Oedipus did not resolve the struggle with his patricidal-incestuous impulses we find that Orestes does resolve the struggle with his matricidal-cannibalistic impulse. While Oedipus scorns the gods (religious sources), Orestes turns to the gods and asks for help.

How then, does Orestes extricate himself from being "a spirit absolutely ignorant of joy", a man who can only devour-murder or be devoured-murdered?

The first step is the awareness-confession that he cannot extricate himself from his dilemma, that he is not sufficient in himself (gives up infantile omnipotence).²⁸

The chorus discusses this shift in Orestes when it says:

²⁸In the language of Alcoholics Anonymous, he "bottoms out", i. e. , becomes aware that he cannot help himself and that his insistence that he needs "no one" is leading him ever more closely to destruction and despair.

Ah, but the swaggering sinner, I say,
 Whom ramsacks right pell mell with wrong,
 Shall one day have to strike his sail
 In the strain of the jib and the squall,
 With shattered yardarm gone.
 Pleading his sound-lost calls he's caught in the deep
 Unassailable swirls. The laugh
 Of the gods is gay at the sight of this desperate man,
 No longer the braggart but bound and pressed
 In the comb of unmountable crests:
 He and all his original luck
 Swept on the rock of the Right
 Unwitnesses--away--unwept.²⁹

The second step is to reach out for help without becoming murderous if it is not immediately forthcoming or if it takes time for the help to be understood and become effective. Orestes is willing to surrender to that which is necessary if he is to be helped.

Pallas Athena, Princess,
 Apollo sent me here--a stricken man.
 Be kind and shelter me.

....
 I come before your house, great goddess, and your image;
 and here I'll watch and wait till the issue of my trial.

....
now from a rinsed and holy mouth
 I call upon this country's queen--
 Athena: come and save me!

....
 Oh, may she come!
 (for she hears like a goddess afar)
 and let her unloosen me free.³⁰

Unlike Oedipus, Orestes asks the gods for help and uses their shrines to that end. He renounces his rage and becomes a grateful

²⁹Ibid., pp. 181-182.

³⁰Ibid., p. 169.

son who surrenders to what the gods ask, i. e., makes sacrifices at the altars to purge himself of his sin.

I need no cleansing now:
come not with dripping hands,
but guilt ground down--already worn away--
on other's thresholds: the thoroughfares of men.

For the blood on my hands is sleeping, paling.

....

In its first freshness even, it was cleansed
at Apollo's hearth by sacrifice of swine...
but that would take too long to tell (how it began,
and those I conversed with and never harmed)
Ah! Time in passing washes out the past.³¹

It is because of this that Orestes can appeal to Athena for help.

I am no contaminated suppliant
clinging to your effigy with dirty hands.
I'll give you proof of this--a weighty proof.

The man of blood keeps mute, the canons say,
until he is sprinkled with a yearling sacrificed
by one who is fit to wash his blood away.
Victims and running streams,
these rites at other seats I have fulfilled:
this care at least I clear from off our way.³²

Orestes is no longer a "house pet (who) has turned and taken a bite out of love", but is a suppliant who comes asking for goodness, willing to wait, willing to control his rage, willing to surrender and receive. He has learned that:

³¹Ibid., pp. 169, 171.

³²Ibid., p. 178.

There is a time for fear
 To sit inside the will:
 To guard and there preside.
 Oh, it is good
 To groan and so be wise.³³

He has learned:

To bow before the shrine
 Of right; not let
 Your lusting eyes for gain
 Ungod your foot against her,
 Or punishments will follow:
 The end will fit the cause.
 So let a man first serve
 His parents filiality;
 Then to those
 Who gather in his house
 A reverent amiability.³⁴

Athena receives Orestes' request for help with the words:

... You've cast yourself (with ritual care)
 harmless and annealed, as a suppliant on my house.
 I receive you therefore in my city unaccused.³⁵

A trial is held to determine whether Orestes should be murdered in punishment for his murder of Clytemnestra or whether he should go free. The furies argue for Orestes' murder, Apollo and Orestes argue for acquittal. When the jury withdraws to vote, Orestes says: "This is the end: a noose or the full clear day."³⁶

When the jury returns, Athena announces the results: "This man stands acquitted on a charge of blood: the number of votes is

³³Ibid., p. 180

³⁴Ibid., p. 181.

³⁵Ibid., p. 179.

³⁶Ibid., p. 190.

equal.³⁷

Orestes is pronounced neither guilty nor innocent, he is only freed. For the first time Orestes becomes a man of joy:

O, Pallas Athena, you have saved my house:
I was stripped of my country and you gave me home.
Now I depart for home,
With an everlasting promise to this state and people:
Never shall a princeling of my land
set out with furbished spear against you.³⁸

Thus the cannibalistic-murderous son becomes the grateful, caring son. Mother and son are neither guilty or innocent. The past is past; the future lies waiting. Orestes cannot recover the mother who "flung him out", but by renouncing his rage he can recover a country and a home (motherland).

The problem is not completely solved, however, for Athena still has the furies on her hands. Because Orestes has escaped punishment, they threaten to turn their destructiveness on Athens:

Curse on you upstart gods who have ridden
Down immemorial laws and filched them
Clean from my fingers. Abused, disappointed,
Raging I come--oh, Shall come!--
And drip from my heart
A hurt on your soil, a contagion,
A culture, a canker:
Leafless and childless Revenge
Rushing like wildfire over the lowlands,
Smearing its death-pus on mortals and meadows.³⁹

³⁷Ibid., p. 191.

³⁸Ibid., p. 192.

³⁹Ibid., p. 193.

Athena offers the furies many gifts if they will renounce their vengeance and at first they refuse. Athena is persistent, saying, "I shall not tire of tempting you with good."⁴⁰ And finally the furies accept her gifts and renounce their vengeance. They become, not furies, but goddesses of grace (the gentle ones, eumenides), with a special shrine, honored by the people, sharing in the abundance and glories of Athens. Athena proclaims, "Our passion for good wins out at the last."⁴¹

The play ends as Athena escorts the furies-eumenides to their chambers, calling the women of Athens to accompany them with the words:

Oh, let these apples of Theseus' eye,
 Glory of this land, come forth:
 Girls and matrons, muster of dames,
 Apparelled in purple for honor.⁴²

For the sake of clarity, we need to summarize Orestes' journey, in terms of the hidden content of the plays. Because his mother has flung him out, because she is not completely under his control, he wants to murder her. There is no perception that the hated mother is also the beloved mother, therefore there is no interference with the murderous rage. Once the deed is committed, the hated, murdered mother comes back to haunt Orestes with his own

⁴⁰Ibid., p. 195.

⁴¹Ibid., p. 198.

⁴²Ibid., p. 200.

cannibalistic rage. She who was outside is now inside. She who was to be murdered-devoured is now the murderer-devourer.

When Orestes becomes the victim of his own cannibalistic rage, he realizes that he cannot save himself and reaches out to the gods. In the reaching out he learns that he must atone for his sin by sacrificing at the altars, that he must not harm those from whom he desires help. As a result, he is able to ask Athena (the good mother) for assistance. In asking he frees himself from the past and is able to look forward to goodness in the future.

The residue of cannibalistic-rage is still there, however (in the form of the furies). How does one guarantee that it will not re-appear and lead to the same despair and destructiveness from which Orestes was saved? Athena has the answer: one must continue to be tempted by goodness. Rage toward the bad mother is given up for the sake of preserving the good mother. Evil is overcome by good; it is not done away with.

We can now, also, make explicit the religious dimension of the Orestes plays.

The Christian Church and the Christian myth remind man that he is tempted to destroy the source of goodness because he cannot possess it. It reminds him that equality with God is not a thing to be grasped.

In the sacrament of communion man is confronted with his cannibalistic impulse and enabled to face it himself.

In the belief in self-sacrifice man is reminded that he must move from being a devouring child to becoming a giving, caring adult.

We are invited as Christians to move from being complaining, ungrateful children who are enraged because we haven't received enough to becoming responsible adults who love and give because we have been loved and given to.

In the institutional church and in the Christian myth we are invited ever anew to learn what Orestes learned: we are born sinners and must find salvation; that salvation is outside of ourselves because we are not self-sufficient; and finally that we find salvation when we stop demanding it and rather surrender to it.

As one reads the Orestes plays, he is reminded of the experience of the disciples. They were angry that they could not possess Jesus. They found him when they lost him, i. e., when he was crucified, they found him by living in his spirit as caring persons who needed one another.

CASE HISTORY NO. 3

The following case illustrates: Observation of religious experiences and the internalized mother at the oral stage. The case description will probably not do justice to the multiplicity of factors involved in schizophrenic illness.

This thirty-two year old, Black, divorced, Protestant mother of four children entered therapy following discharge from a psychiatric hospital after experiencing another of several prior acute psychotic episodes. She was overtly ill with paranoid schizophrenia. There was much evidence from her psychiatric history and evolution that she had suffered from latent schizophrenia since pre-adolescence. By the age of twenty-five she had had at least three hospitalizations following acute schizophrenic episodes. Her response to therapy had been poor both as an inpatient and outpatient.

During the first session with her the writer observed her verbalizing and delusional experience of her life, the content of which was religious. She stated that the Lord had commissioned her to go out and "save the world". When asked where she got this idea from, she stated that she had been attending a Jehovah Witness Kingdom Hall, although she grew up a Baptist. She further stated that "the Jehovah Witness" group accepted her, made her feel wanted and gave her something to do, that is, pass out literature to "the lost people of the world".

She was unable to recall being close to anyone since she was a child, except her mother, for whom she had much ambivalence. She stated that she felt her problem began after her father raped her when she was eleven years old. Describing her father as a "crazy man", who was himself placed in a mental hospital before his death, the patient stated that she hated her father and wishes she could have killed him, but was too young. She continued that her father raped her more than once and an older brother, who later became an institutionalized mental patient.

During the first four or five sessions the patient attempted to seduce the writer, dressing herself in short, tight dresses and skirts, with lip gloss and perfumed powders. These sessions were spent defining my role as that of her therapist and not her lover. When the writer finally got through to her that he could not make love to her, she stated that she understood, but resisted by not showing up for the next three scheduled sessions. When she did return, she was dressed in white from head to feet and was carrying her Bible. Her thought content was of religious experiences she had had since childhood. She mentioned that she had, at some time in the past, seen Jesus standing by her bed.

In her description of her relationship with her mother throughout her natural life, the woman indicated that there was mostly hostility between herself and her mother, but she still loved her.

Although she continues to try to live with her mother, the conflict becomes so intense that the patient had to move out or become so psychotic as to require hospitalization. She expressed that her mother really did not love her, because her mother used to beat on her as a child and even as a young adult. But she sees her mother as the most stable force in her life since "all the rest of my folks are crazy".

The patient further described how her mother punished her either by beatings or by being locked up in a closet. Her mother would tell her how much she looked like her father, whom her mother hated. Her mother would tell her that she was "crazy because she (patient) was a sinner." She could not rely upon any family member, including her mother, for emotional support, feeling that they all put her down. As the therapeutic relationship developed, the young woman would often imply that the writer was supportive and empathic, although she was quite suspicious and distrustful of others.

Part of what was happening in the patient's relationship with her mother was that her mother was rejecting the patient's femininity. The patient recalled that as a small child, her mother would fiercely run her out of the bedroom when the patient attempted to get in bed with her mother and father. It was not long after this period that her father succeeded in raping her for the first time.

Although the psychopathological material seen in this patient is not much different from that found in many hysterical patients, the

mother-daughter transference relationship described did much to produce the intensity of the patient's psychosis, to say nothing about the amount of psychopathology produced by the father's incestuous aggressiveness in carrying out his sexual wishes toward the patient as a child, all of which interfered with the adequate resolution of the Oral-Oedipal complex.

The patient, during periods of deep depression, has seriously entertained suicidal thoughts and has made several attempts through drug overdose, by mouth. In retrospect, the writer realizes now that the increased disturbance which had necessitated this patient's recurring hospitalizations stemmed not from purely de-repressed murderous feelings alone, but rather from de-repressed ambivalence--tender and solicitous, as well as murderous, that is, feelings traceable to her early relationship with her mother.¹

The writer is of the opinion that on the basis of the clinical experiences described in the above case, schizophrenic regression is not a defense against aggression alone, but overwhelming ambivalence for either parental figure.

By the use of psychotherapeutic techniques of the supportive matrix, together with the prescribed chemotherapy to which the patient

¹R. C. Bak, "The Schizophrenic Defense Against Aggression," International Journal of Psychoanalysis, XXXV (1954), 129-134 states that schizophrenic regression is a defense against aggression.

has responded favorably, her overall psychosocial functioning has improved to the degree that no recent hospitalization has been required, and she now has the ego strength with which to function and live independently.

As the months passed, she developed the insight and motivation to return to her Baptist church tradition and away from the more rigid, fundamentalistic and legalistic Jehovah Witness religious faith and practice, which was "confusing" to her. She does recognize and appreciate the good she got from the relationship with Jehovah Witness followers, that is, socialization and acceptance by some cohesive group. But there was too much emphasis upon death, immortality or the future. There was to her, too much stress upon destruction of this sinful world by a force that is supposed to be good and creative. There was too much emphasis upon what happened in the past or what bad things will happen in the future and not enough religious teachings on living in the "here and now".

With the transference evolution which has taken place throughout psychotherapy with this patient, thus far, she might be said to be on the road to recovery. Much will depend upon her continued insight and motivation. It is anticipated, based upon experience, that much strength will be gained from her renewed relationship with her Baptist roots, where both parents and other significant person are also connected.

CHAPTER V

PSYCHOTHERAPY IN THEOLOGICAL PERSPECTIVE

The purpose of this chapter is to review the concerns about psychotherapy which contemporary theologians have expressed in an attempt to gain a theological perspective from which to view the practice of psychotherapy. The major endeavor will be to understand what these theologians are saying about the nature of man understood from the point of view of the Christian faith in order to gain a sensitivity to the dangers which the practice of therapy might hold for such a view.

A. REINHOLD NIEBUHR

One contemporary theologian who has not addressed himself specifically to the problem of psychotherapy but whose writings present a doctrine of man which could be critical of the process of therapy is Reinhold Niebuhr. The specific issues where Niebuhr's theology and psychotherapy might stand in opposition are the problem of the reality of sin defined as pride or self-love and the problem of obedience and self-abnegation as the proper attitude toward God. Niebuhr sees the Christian view of man to be one in which man is finite and anxious over his finitude while at the same time he transcends his finitude through the freedom of the spirit. The finiteness, dependence, and the insufficiency of man's mortal life are facts which belong to God's plan of

creation and must be accepted with reverence and humility. However, man is not content to accept his position; instead, he is constantly tempted to sin, which is idolatry or pride, because "in contemplating the power and dignity of his freedom he forgets the degree of his limitations."¹ Niebuhr sees sin as a morally responsible act of man. The occasion for his sin is the ambiguity of his position as standing in and yet above nature. The ambiguity of his situations fills man with insecurity and anxiety and this tempts man to sin. However, Niebuhr insists that anxiety is only the temptation, not the sin. The biblical view holds man as the responsible agent who chooses to succumb to the temptation. "The Bible consistently maintains that sin cannot be excused by or inevitably derived from, any other element in the human situation."² The nature of the sin to which man succumbs is pride.

Man is insecure and involved in natural contingency; he seeks to overcome his insecurity by a will-to-power which overreaches the limits of human creatureliness. Man is ignorant and involved in the limitations of a finite mind; but he pretends that he is not limited. He assumes that he can gradually transcend finite limitations until his mind becomes identical with universal mind. All of his intellectual and cultural pursuits, therefore, become infected with the sin of pride.³

¹Reinhold Niebuhr, The Nature and Destiny of Man (New York: Charles Scribner's and Sons, 1964), pp. 178-179.

²Ibid., p. 179.

³Ibid., p. 179.

The relationship of anxiety to sin is an important one for the future critique of psychotherapy because anxiety is such a large part of the dynamics of neurosis. Niebuhr sees anxiety as anxiousness which man experiences as he comprehends his human situation. Two experiences are labeled as anxiety. One is the fear of man as he faces the limitations of his finitude and sees his end in death. The second experience, which is also labeled as anxiety, is the drive to reach the limits of his possibilities. Niebuhr sees man as being insecure because he does not know the limitations of his capabilities in any area of endeavor. It is the anxiety resulting from this insecurity which supplies the motivation for creativity. Because man is anxious over the lack of defined limits of his capacities he must seek to allay this anxiety by extending these capacities and finding the limits. Thus Niebuhr sees the negative function of allaying anxiety as the source of all of man's creativity.

Anxiety is the basis of all human creativity as well as the precondition of sin. Man is anxious not only because his life is limited and dependent . . . he is also anxious because he does not know the limits of his possibilities. He can do nothing and regard it perfectly done, because higher possibilities are revealed in each achievement.⁴

Sin is man's morally responsible act and also, paradoxically, his reaction to anxiety. Sin has two dimensions. "The religious dimension of sin is man's rebellion against God, his effort to usurp the

⁴Ibid. , p. 183.

the place of God. (The Oedipal Conflict.) The moral and social dimension of sin is injustice."⁵ Pride is the label for both dimensions of sin. Injustice is a result of pride because the ego, in attempting to make itself the center of existence, subordinates other life to its will and thus does injustice to other life. Under sin as pride, Niebuhr equates self-assertion, domination, self-love, and self-deification. Any act which involves any of these is an act of sin and since all acts involve them in varying degrees all acts are sinful.

An example of sin operating in the area of sex points out the complicated nature of man's involvement in sin. Sex is seen as a particularly vivid form of sensuality. The sexual is subject to and compounded with the freedom of man's spirit, as is every other impulse in man. It is not something which man could leave imbedded in some natural harmony of animal impulses. In the sex act the sinful nature of man and also his creativity are most clearly expressed. Sex is not sinful as such, but man is sinful, so the instincts of sex become the tools for either the assertion of self, the escape from self by the deification of another, or the escape from self simply as a result of the passion of the experience. All three forms are manifestations of sin as pride.

⁵Ibid., p. 179.

The sexual act thus becomes, in human life, a drama in which the domination of one life over the desires of another and the self abnegation of the same life in favor of another are in bewildering conflict, and also in baffling intermixture. Furthermore, these corruptions are completely interlaced and compounded with a creative discovery of the self through its giving of itself to another.⁶

Niebuhr sees the sense of shame, which he feels is universally attached to the performance of the sexual function, as man's guilt over his sin and therefore as proof of the inevitable attachment of sin to sex.

Another area of Niebuhr's thought which is important to this investigation is the problem of authority. Niebuhr, in the tradition of Augustine and Calvin, sees man's proper relationship to God as one of submissive obedience.

According to the Christian faith each individual life is subjected to the will of God. It is this obedience to the divine will which establishes the right relation between the human will in its finiteness and the whole world order as ruled by God.⁷

This subjection to the will of God, which is termed the ideal possibility, in Niebuhr's terms does not involve "self-negation" but "self-realization".⁸ However, by self-negation is meant loss of particularity or individuality and by self-realization is meant subjection of the particular will to the universal will. It is not made clear whether the particular will is united with the universal in this

⁶Ibid., p. 236.

⁷Ibid., p. 58.

⁸Ibid., p. 112.

subjection, or is purified, or destroyed, or altered. All that is emphasized is that such subjection to the will of God is not accomplished by man, because he is unwilling to trust God. This lack of faith then becomes "the prior sin which posits sin."⁹ The point is that obedience is always the proper attitude of man even though his sin prevents him from assuming this attitude.

A final emphasis of Niebuhr which has relevance for a discussion of psychotherapy is the priority of the Christian faith as a basis for self-understanding. Niebuhr holds that, because the self stands outside itself and the world, it cannot find its meaning in itself or the world. Simply stated, man is spirit and transcends his own nature. Yet he cannot know himself, because his ego is always subjective. The only possibility of gaining objective self-knowledge is through the self-disclosure of God culminating in the revelation of Christ. Thus the Christian faith which accepts the revelation must be the starting point for self-understanding.

To understand himself truly means to begin with a faith that he is understood from beyond himself, that he is known and loved of God and must find himself in terms of obedience to the divine will.¹⁰

In view of his position, Niebuhr's possible opposition to psychotherapy would occur at those points where the process of therapy tended

⁹Ibid., p. 252.

¹⁰Ibid., p. 15.

to blur the paradoxical character of man's nature as creature created in the image of God and yet sinner. All that could be acknowledged regarding man's capabilities is that there is a "point of contact between grace and the natural endowments of the soul."¹¹ Any affirmation of self-worth and joy in human capabilities as a part of the process, leading to a state of self-confidence would be considered another expression of man's sin. Also any attempt at a true analysis of the nature of the self, apart from a commitment of faith, would be impossible. In fact, the whole process of therapy could be considered irrelevant since the nature of man's need does not lie in the direction of cure of mental or emotional symptoms, but in the direction of the establishment of a proper relationship with God. The symptoms merely indicate the existence of an improper relationship. Man's major responsibility is to keep the paradoxical nature of his existence ever before him, as a precondition of establishing a proper relationship with God.

Because of his emphasis on anxiety as the source of creativity as well as of sin, Niebuhr would also be critical of therapy where it tended to reduce anxiety. A last point of opposition might be in the area of obedience. Where therapy encourages rebellion (that is,

¹¹Ibid., II, 117.

acting out as a necessary step in breaking dependency bonds) this could be viewed as poor preparation for Christian obedience.

B. ALBERT C. OUTLER

One contemporary theologian who has addressed himself to the field of psychotherapy for many years is Albert C. Outler. Outler gives a summary of current psychotherapeutic practice and emphasizes the points at which psychotherapy and the Christian message are in opposition. Outler's major concern with respect to therapy is that the basis for current therapeutic practice grew up apart from, and in opposition to, Christianity. He feels that it has never been sufficiently noted that the men who have developed psychotherapy from Freud down to Fromm and Alexander were heirs of movements which opposed Christianity. First, he feels that they are descendants of the eighteenth-century Enlightenment whose major beliefs he summarized as:

1. Man is not natively depraved.
2. The end of life is life itself; the good life on earth instead of the beatific life after death.
3. Man is capable, guided solely by the light of reason and experience, of perfecting the good life on earth.
4. The first and essential condition of the good life on earth is the freeing of men's minds from the bonds of ignorance and superstition.¹²

¹²Albert C. Outler, Psychotherapy and the Christian Message (New York: Harper & Row, 1954), p. 39.

These beliefs would reduce God at best to the ground and source of nature. The founders of therapy are also in the tradition of the "reductive naturalism" of Darwin, Spencer, Feuerbach, and others, which did away with even the last vestiges of God's power.

God is ruled out and human values are, in one way or another, unique emergents in a natural process otherwise blind or indifferent to the human enterprise. Man can and must make of nature what he can; it is an illusion to suppose that nature is the created organism in which God is working out His will and purpose.¹³

Because this is the background of psychotherapy Outler is opposed to a wholesale acceptance of the method by the church. While there are important contributions to be made by therapy there are also dangers involved in its philosophy. The contributions which therapy has to offer are seen as:

1. Therapy challenges Christianity 'to grow into an active confidence in the curative forces at work in persons and society.¹⁴
2. Therapy emphasizes a respect for persons.
3. Therapy illustrates the interpenetration of the biological and psychological vectors of life and the subpersonal and impersonal matrix of human life.
4. Therapy shows that neurotic behavior is not really meaningless and ought, therefore, never to be dismissed as simply weird or unintelligible.
5. Therapy shows the need of developing an ability to listen.
6. Therapy illustrates the psychodynamic process of growth and development from infancy to maturity.

¹³Ibid., p. 41.

¹⁴Ibid., p. 170.

7. Therapy shows that moralism, defined as obedience to external and imposed moral force, is an invalid and harmful incentive to psychological maturity.
8. Therapy provides a demonstration of the projective and delusive character of much of religious thought and feeling.
9. Therapy gives an insight into the awful price of repression. It has shown the ways in which psychic energy can be locked up or reduced in the struggle between competing thrusts and controls of the unconscious.
10. Therapy illustrates the sovereign virtue of love and shows that incorporative or possessive love is always inferior to outgoing concern for and loyalty to the well being of the loved one.¹⁵

These contributions should now be assimilated by theology but the philosophical basis of the process should be replaced by a Christian basis, if they are to have meaning for pastoral counselors in the Christian context or church setting. Christianity needs to develop its own practical wisdom regarding psychotherapy.

Psychotherapy's practical wisdom is its very own, empirically founded. The naturalistic world view it generally exhibits is borrowed. Christianity's practical wisdom is largely borrowed; its theistic world view is its very own, the bone and marrow of its gospel. A psychotherapy which freely admitted the Christian doctrines of God and man as the referential frame of its empirical work could be well consorted with a Christian care of souls which fully acknowledges the direction and counsel of scientific psychotherapy.¹⁶

The naturalistic world view of which Outler speaks finds expression in the therapeutic process where this process touches on the nature of man, his destiny, and the ordering of the world in which he makes his home. It is in these three areas that the Christian message stands in judgment of the naturalistic world view.

¹⁵Ibid., pp. 122f.

¹⁶Ibid., p. 245.

The transcendence of the self. --Regarding the nature of man, the issues are the existence of the transcendental reality of the human self, and the human quandary of sin. Essential to the Christian gospel is the existence of the transcendental reality of the human self. The self must be capable of communion with God. God is transcendent. Therefore, the self can only have communion with God if in some way it can assume transcendency. However, the self is not transcendent, it is limited, so there is no way for it to gain transcendency unless it is already rooted in such transcendency.

In the Christian view, therefore, there could be no human selves apart from God--without a relation to God--because the ground or anchor point of the self's transcendence is in God. In no other way could a finite self subsist transcendently.¹⁷

While therapy cannot be expected to deal with the subtleties of the self's transcendence, what must be guarded against is such concentration on the web of physical, biological, psychological, and sociological patterns out of which the self emerges that the self is identified with the natural process. A self which can be explained under the causal order of nature is not the self which exists in a unique relation to God. Some process theologians may not agree with this view.

The quandary of sin. --The human quandary of sin is the second aspect of the nature of man where Outler feels psychotherapy presents an inadequate view. Man in the Christian faith is neither

¹⁷Ibid., p. 69.

alone nor supreme in his universe. The universe is not indifferent to his fate. He is not his own final reliance. He is, first and last, God's creature, endowed with freedom-in-finiteness. To quote Outler,

God purposed to create a community of finite, free and rational creatures who could react to Him and to one another, in a mode of responsibility which is distinctive in the order of creation. . . Man is made for sharing in such a creative and redemptive process, for he is made for faith, for commitment, for community, for love.¹⁸

Man, however, does not fulfill the potential for which he is created. He chooses to become estranged from God and thereby loses his capability to find fulfillment. Further, once the choice of estrangement is made, and such a choice is inevitable, then man loses the capacity to redeem his situation. Outler is very close to Niebuhr as he analyzes man's misinterpretation of his freedom as the source of his downfall.

The actuality of freedom carries with it the strong temptation to interpret the power of freedom as the sign of infinite power. Lured by this, men surmise that they can secure themselves from the ever-present threats of insecurity by their own powers of freedom, love and reason--and thus they find it hard to trust and rely on the uncertain providence and grace of God.¹⁹

Sin cannot be overcome by knowing God and knowing of his love. This Outler believes is the error of liberal theology. All that

¹⁸Ibid. , p. 129.

¹⁹Ibid.

overcomes sin is the grace of God through faith, and even faith is a gift. This is because man in the anxious condition of his finitude feels a greater threat to his very being in choosing faith than in choosing unbelief and seeking to overcome his finitude by himself.

Therapy cannot change humankind's essential sinful condition. Indeed, his neurotic symptoms are the result of his condition--"the disorders of life are rooted in the loss of man's true confidence in in life and his estrangement from that love which supports all true love on which he depends."²⁰ The techniques of therapy are helpful in bringing a patient to self-knowledge, self-acceptance, and self-affirmation and enhance the patient's capacities for rational and self-directed living, but that is all. As Outler said in a personal interview, "the work of psychotherapy is to bring a person to the point where he can be educated."²¹ There are resouces of authentic faith and worship to help men go beyond therapy. Man's disorder grows and feeds upon itself and man cannot come to be himself fully until he enters into the truth of having his being in God's hands and not his own.

The criticism of psychotherapy which such a view of man's sinful nature offers is that therapy tends to substitute faith in man's essential capacity for growth for confrontation with the radical nature

²⁰Ibid. , p. 142.

²¹Interview with Albert Outler, January 26, 1960.

of man's sin.

The possibility of salvation. --Closely related to man's condition as sinner is the possibility of salvation. This the Christian faith offers in terms of reconciliation and redemption. In this regard Outler sees therapy's solution of man's situation to be too pessimistic. Man's only hope in therapy, which is equated with humanism or naturalism, is partial self-fulfillment. Erich Fromm is quoted as saying, "the development of the self is never completed; even under the best conditions only part of man's potentialities is realized. Man always dies before he is fully born."²² This is taken to be a testimony to the meaninglessness of life because complete fulfillment is denied. Where nature is conceived as the ultimate context of existence then there is no possible meaning of life beyond nature. Man's destiny is simply endless occurrence. The Christian faith on the other hand, testifies to the human possibility of growing into sufficiency and fulfillment in God's providence through trustful response to God's grace. Outler is more optimistic than Niebuhr at this point and sees God's purpose for man to be, at least in part,

the establishment of a human community on this earth, living in the maturity of love, exercising the powers of finite freedom and rationality, reliant faith to buoy them up, humility to aid in self-acceptance and community, faith to bind them to God and to their fellows, grace to purify and ennoble their self-assertions.²³

²²Ibid., p. 173.

²³Ibid., p. 176.

This is the human possibility.

In viewing man's possibilities Outler thinks therapy is too pessimistic, but in viewing man's capabilities it is too optimistic. What is missing in therapy is the gospel's demand for conversion or for depth regeneration and the optimism which follows such regeneration. Such regeneration comes only as God, not man, is placed at the center of existence. Because man is always in sin he can never find fulfillment through his own powers. He must respond with glad acknowledgment to God's control of his life. Conversion is this acknowledgment of God's control.

The emphasis of Outler on the danger of man rejecting God by trusting in his own powers would seem to deny the validity of man's best efforts on his own behalf. He seeks to contradict this conclusion, however, by stating that the "human possibility and its attainment is a project which God and man share together: God as Creator-Spirit; man the wayward creature of God's love and care."²⁴ However, if man is only a wayward creature of God's love and care it is difficult to see what his share would be in the project of attaining the human possibility. Nevertheless Outler maintains that there are no a priori limits set by God to human virtue when effected by grace. Man was made to be blessed by growing in grace toward the stature of the perfect man.

²⁴Ibid., p. 178.

Such a view of man's perfectibility in grace can be maintained only if the witness of Christian experience of the past and present is accepted. Thus it becomes important to Outler that such religious experience be accepted as more than psychological material and in some sense transcendent. "They stand in firm confidence on the pragmatic evidence from the Christian community that the life or grace is not merely a seeking but a finding as well."²⁵

"The truth claims of the Christian faith cannot be proved... but they can be tested by the self-validating experiences of high communion with God."²⁶

In summary, the concept of salvation in the Christian faith challenges therapy at the point of therapy's fatalistic acceptance of man's finite involvement in nature. Therapy should acknowledge that it's cure of neurosis is only a partial cure of man's soul and that man still has to face the question of meaning in life.

Man's ethical responsibility. --The final area in which Outler discusses the opposition of the Christian faith to therapy is man's ethical responsibility in his world. The heart of the criticism is that man cannot obtain an ethical stance in this world without a transcendent frame of reference. If man is limited to being formed by society then he has no perspective from which to judge society.

²⁵Ibid., p. 182.

²⁶Ibid., p. 255.

The Christian ethic is no less interested in the optimum conditions for human development but it is convinced that the transformation of life comes as an interaction of man with a reality and power beyond man, from man's response to God.²⁷

The psychological ethic is seen as a way of ordering life by self-affirmation. There is the confidence that human life transforms itself in the absence of crippling influences and in the presence of love and rational insight.

The Christian ethic is seen as a way of ordering life by self-denial. The term, "self-denial," is a difficult one to use as Outler does. He points out that self-denial does not mean self-hostility or self-punishment or self-deprecation. It is, rather, a denial of self-sufficiency-without-reference-to-God. "True self-denial, in its simplest terms is the deliberate repudiation of the notion that the self is infinite, or sufficient, or in any ultimate sense, autonomous."²⁸ Differences in the humanistic and the Christian ethic in terms of ideals may be slight but in terms of possible realization they are great. The theme is again that man must respond to God if his inner motivation is to be changed. It is not a matter of rearranging his environment nor changing his self-estimation but rather transforming his inner and true self which is now in a state of sin.

Summary of Outler's position. --The humanist and reductionist

²⁷Ibid. , p. 224.

²⁸Ibid. , p. 227.

basis of psychology has resulted in the secularization of psychotherapy. Much practical wisdom about man has been learned from psychotherapy but psychotherapy is not to be taken as an end in itself. The crucial danger in psychotherapy is the education of its patients in a world view which excludes the radical nature of man's dependence on God. Expressions of this danger are:

1. In psychotherapy, persons, not God, are set at the top of a scale of values.
2. In psychotherapy there is no Christian insistence on the radical need for depth regeneration. The dilemma of man's sin is not taken seriously.
3. In psychotherapy the healing action of nature is regarded as the means to human maturation. The nourishment of life by the means of grace of the Christian tradition is disparaged.
4. In psychotherapy the organization of human society is viewed as a plastic medium in which human foresight and planning are decisive. The hope for society is what man can do for himself.

C. DAVID E. ROBERTS

Writing from a different perspective from either Niebuhr or Outler, David Roberts seeks to introduce psychotherapy as a positive contribution to the Christian faith. Speaking from a clinical orientation which validates the experiences in therapy, Roberts sees a close

affinity between what happens in therapy and what the Christian faith seeks to accomplish in terms of healing of persons. He says,

if the church is really interested in curing sin, instead of merely calling attention to its ineradicability, it will not despise the effective help which "worldly" agencies can offer, even though the agencies in question do not use the word sin.²⁹

As a Christian theologian, Roberts addresses himself to many of the same issues which Niebuhr and Outler discuss. Specifically these are: Man in the Image of God, Moral Responsibility, Bondage to Sin, and Salvation. The differences between these men are subtle and many of their statements are very similar. For instance, Roberts is in close agreement with Outler in recognizing that the naturalist position of many therapists is a faith claim which goes beyond the empirical results of their investigations. He states that,

those who claim that psychological investigation can, of itself, determine the truth or falsity of religious beliefs usually take it for granted that once the human sources of religion have been brought to light further explanations are superfluous.³⁰

Also, Roberts agrees with Outler and Niebuhr that a Christian view of man is the only proper perspective from which the psychiatrist or anyone can properly view his task.

²⁹David E. Roberts, Psychotherapy and a Christian View of Man (New York: Charles Scribners, 1950), p. 93.

³⁰Ibid., p. 144.

However, there are important differences in their positions. These differences hinge around two major points of difference. The first of these points is an epistemological difference. Roberts sees all truth as mediated through the psychological processes. He says that while the truth or falsity of a religious belief is never merely a psychological question, psychological considerations are relevant to it and that there is, "an intimate connection between the way a mind works, psychologically speaking, and the likelihood of its reaching truth of any kind."³¹ Outler and Niebuhr, on the other hand, imply that the truth of the Christian faith is known and that any psychological investigation of thought processes regarding this truth is not of primary importance.

Roberts also sees an experiential basis for understanding theology which is not emphasized by the others. Universally valid principles of life are actualized in persons. "Whatever is valid in Christ's disclosure of God is universally operative in human life, and therefore is verifiable within experience."³²

The second major point of difference is found in how these men conceive the purpose of their theology. Niebuhr and Outler lay great stress in their theology on defending the transcendent role of God. Niebuhr is more exaggerated in this than is Outler but both devote much

³¹Ibid., p. 145.

³²Ibid., p. 142.

time to accenting the "over against" character of God which judges any attempt of man to affirm self-reliance. Roberts, on the other hand, is more interested in defending the immanent character of God. He sees God moving through his creation and is interested in lifting up the ways in which God manifests himself in the existing resources of human nature.

A discussion of the concepts of sin and salvation from Roberts' point of view will serve to clarify further the basic differences between these men.

Bondage to sin. --At many points Roberts sees a remarkable parallel between the Pauline-Augustinian conception of original sin and the psycho-analytic conception of neurosis. In both instances man is filled with inner conflict, hate, envy, and mistrust. Also, it is the basic condition of man in both instances which is the central cause of his problem and not his particular "sins." Because of this, particular "good deeds" have little effect in changing his condition. The responsibility for man's condition is a tangle of necessity and personal choice. In both instances the central problem cannot be solved merely by an effort of will; insofar as it is ever solved the will itself must be changed. Sin is basically alienation from God, and this alienation results in character and emotional disorders of which the neurosis just described is an example. Sin as a description of man's condition is adequate, but as a rigid concept which man cannot alter or change in

any way, it is inadequate.

Roberts recognizes the danger of exaggerating the extent to which man can solve the problem of evil on his own, and criticizes psychotherapy when it adopts this point of view. He says

with a few exceptions, the psycho-analytic movement has concentrated upon the emancipation of man from prescientific moralistic and religious fetters. It has not looked at the other side of the picture, namely, the extent to which the worst diseases of modernity have been connected with a worship of human self-sufficiency.³³

On the other hand, he sees a similar danger in underestimating and failing to implement the resources of health and recovery which are actually available. The strongest theological argument, he feels,

takes the form of holding that Christian belief provides a basis for the affirmation of human possibilities as grounded in God. . . we have a right to reject any theology which ignores or belittles man's participation; we can even say that man creates value in the sense that without him it cannot be actualized.³⁴

The insights of psychotherapy can contribute to an understanding of a doctrine of sin. Roberts sees the following as some observations which should be included.

1. It is observed in therapy that evasion of responsibility aggravates a problem or delays solution.
2. It is observed in therapy that a full awareness of personal limitations, and contrition for those which are alterable, are preconditions of moral improvement.
3. It is observed in therapy that the social ramifications of evil, which run far beyond what the individual can control or alter,

³³Ibid., p. 114.

³⁴Ibid., p. 115.

violate our conceptions of what life could and should be like; therefore, even at those points where one has to "accept" them, the acceptance is not simple acceptance.

4. It is observed in therapy that when sin is faced in a personal relationship of trust, a man may be enabled to do something about problems he was previously impotent to solve.³⁵

These therapeutic observations present a much "softer" view of sin than the stern theologies previously discussed.

A final point where Roberts' understanding of the nature of sin differs particularly from Niebuhr's is in regard to the doctrine of the imago Dei. The doctrine of the imago Dei asserts that man's distinctive capacities are intrinsically good. Man is a finite creature who must struggle to maintain his own existence and such struggle is not evil.

A measure of self interest is healthy and blameless. The will to live, creative expression of individuality, special devotion to family, friends, vocation and nation are appropriate to man's situation, and linked to his God-given endowments.³⁶

Salvation. --Roberts distinguishes between what he terms a static and a dynamic view of salvation. The static view of salvation is the view which places exclusive stress upon the judging and redeeming activity of God in the work

³⁵Ibid., p. 116.

³⁶Ibid., p. 112.

of salvation. Salvation is not conceived of in terms of discoveries and dynamic changes within man but in terms of an alteration of his status before God. His status is shifted from condemnation to justification in the light of what Christ has done. Even when man responds gratefully and trustfully to this saving work of Christ, he can claim no share in inward regeneration; this is exclusively God's accomplishment. Man, in the final analysis, can only claim credit for that which drives him into sin.

In opposition to the static view of salvation Roberts presents what he refers to as the dynamic view of salvation. He sees the goal of Christian salvation as the resolving of conflict within man. Salvation releases a power which replaces guilt with faith. Self-acceptance rather than self-denial is involved in the dynamics of salvation. Psychotherapy indicates that most emotional disorders have their roots in the failure of the individual to reach a satisfactory level of self-acceptance. Static norms which judge all human effort as sinful work against the process of step by step self-discovery and the subsequent self-affirmation of ideals which therapy has discovered to be the only way of successfully altering motivation.

"Salvation is that condition of wholeness which comes about when human life is based in openness upon the creative and redemptive

power of God."³⁷ This act of faith is possible because one can experience the healing power of self-integration in the atmosphere of love which therapy provides. Thus faith in God can rest upon actualities that function in human existence here and it need not be directed exclusively to something which utterly transcends our experience and our history.

Under the topic of salvation, Roberts discusses the issue of sex briefly. He opposes the usual church interest in holding the erotic nature of man down and feels that sex can make a positive contribution toward salvation in terms of contributing to man's wholeness.

A final point summarizes Roberts' position regarding salvation. Whereas Niebuhr and Outler experience man as inevitably prideful, self-centered, and in constant danger of self-deification, Roberts notes an opposing trend in man which he attributes to the divine immanence of God. He holds that the capacity to respond to God's love is directly related to self-love (self-acceptance). The highest value is not love for God and hatred for self but the affirmation of self as grounded in God. Man has the ability in varying degrees to make this affirmation of self.

³⁷Ibid. , p. 132.

the danger of self-deification is omnipresent and if the individual were confined to his own unaided powers he would be at the mercy of the danger. But life does not leave him shut up to his own powers. . . . Even though we cannot employ it infallibly our guiding concept measures salvation not by self-repudiation, but by fruition and joy. ³⁸

³⁸Ibid., p. 138.

CHAPTER VI

SUMMARY AND CONCLUSION

Erik Erikson says that "to assure continuity of tradition, society must early prepare for parenthood in its children; and it must take care of the unavoidable remnants of infantility in its adults."¹

It seems to the writer that we have demonstrated that religious experience can prepare for parenthood in children by representing to them symbols of paternity that are products of centuries of wisdom. At the same time, religious experience can take care of the unavoidable remnants of infantility in its adults by repeatedly inviting persons to become like little children in the service of worship: (eating, fearing, hating, loving--and surviving!)

In a letter to his minister friend, Oskar Pfister, Sigmund Freud makes an interesting comment: "...you can sublimate the transference on to religion and ethics, which is not easy for the invalids of life."²

It seems a fair assumption that Freud was indicating a belief

¹Erik H. Erikson, Childhood and Society (New York: Norton, 1950), p. 361.

²Heinrich Meng and Ernst L. Freud (eds.) Sigmund Freud: Psychoanalysis and Faith (New York: Basic Books, 1963), pp. 16-17.

that healthy people can use the powerful symbols of religion as objects with which to have a personal relationship and through which to continue to grow.

Freud's further comment that this is not an easy task for the invalids of life is no surprise to any man who has served as a church minister and psychiatric social worker. Certainly persons misuse the powerful symbols of religion for neurotic reasons just as they misuse persons in the same way. Our task is not to condemn the person or the church but rather to use the religious experience at our disposal to help the "invalids of life" become more whole and more effective in the task of living in the heart of the Black ghetto or wherever any person of any race, tongue or creed may find himself or herself "on this terrestrial ball", called planet Earth.

By virtue of his several years' experience as an ordained minister and psychiatric social worker in active clinical practice, the writer maintains that religious experience, itself, may be psychotherapeutic or curative of the soul for various persons at varying times. It is also felt, by virtue of longitudinal clinical observations, that psychotherapy may even be instrumental in fostering religious growth in persons who have the basic psychosocial equipment for developing a belief system.

Conversely, certain religious beliefs and practices may be contraindicated, even hazardous for persons with certain mental

illnesses. Thus, as part of the treatment plans for such patients, the concerned psychotherapist would do justice to the cause of mental health by consulting with religious figures who are trained in both theology, and psychotherapy or the psychology of religion and pastoral counseling.

The writer has observed that rigid, stereotyped and confined religious faith and practices can be contributing to emotional instability. The religious philosophy or practice which prohibits or denies the person to adjust to the natural alternating feelings or experiences of pleasure and pain may interfere with the future ability to adjust or adapt. The subjective alternate feelings of pleasure and pain are part of the normal maturational process of growing persons. These anxiety-producing experiences are thought to facilitate learning and growth.

The helpful and therapeutic religious experience, therefore, is that which allows the person to experience pleasure and pain and success and failure without being required to endure undue guilt and shame under the guise of sin and evil or a distorted concept of sin and evil which precludes natural human experience. Many patients were found to be virtually afraid to breathe and feel free inside, which aggravates their psychotic or neurotic condition, and for such patients, emancipation from such religious experiences through insight was necessary to help them onto the road to recovery and wholeness.

The person who hopes to grow strong and be healthy in body, mind and spirit will do well to avoid those religious experiences that

are so rigid and stereotyped as to impede emotional and spiritual growth. This would also include those religious philosophies which teach the adherent against seeking medical and psychiatric help when illness occurs.

Religion and psychotherapy can work closely together in the service of the patient and his environment. While psychotherapy can be and often is instrumental in promoting religious growth, it is in no position to replace religion, especially Christianity as a belief system.

There is a great need for a critical examination of the relationship between psychotherapy and its varied philosophies and techniques, on the one hand, and the Christian world-view on the other. The Christian world-view involves belief in the universality of the Fatherhood of God and Brotherhood of mankind through His Son, Jesus Christ our Lord who is outgoing, unconditional love. As creatures of God, the Creator, we are granted free will, freedom of choice with the responsibility to be both creative and accountable to God and to our fellowman.

Psychotherapy is that area of psychology which, when applied, deals with the diagnosis and treatment of mental disturbance or disorders, guilt, anxiety, depression and meaningless existence which were, for many years, believed to have only religious origins and significance. The patient, in his or her conscious, responsive and responsible state, is encouraged to exercise such free will or freedom of choice as insight is gained. As he is able to do this, he or she may be on the road to wholeness.

Although our basic focus throughout this dissertation has been in reference to psychotherapy in the treatment of neuroses, many of which we see in and outside the church setting, some attention was given to the treatment of psychotic patients who are sufficiently in good enough remission to reap many of the same benefits from psychotherapy as did neurotic patients. Most of the patients with whom the writer has worked over the years have not remained grossly psychotic each day of their lives. Some had experienced psychotic reactions which lasted only a short period of time, say one to six months, and are, again, functioning quite well in society.

Most patients worked with by the writer in the Black community have been those with a relatively long history of psychoses. After working with a number of patients who have experienced recent psychotic episodes for the first time, an indepth study of their psychosocial histories suggest that they might have been living the lives of neurotics for most of their natural lives and were required to come for "help" after almost complete "breakdown" or personality disintegration. Life styles in the Black ghetto can produce anxiety, depression and psychoses.

The lack of adequate study of the working relationship between psychotherapy and the Christian religion has been unfortunate. Whether they are aware of or own up to it or not, religious leaders, particularly church pastors are involved in the mental health of persons over whom

they have influence. They are therefore capable of preventing or helping to contribute to mental illness depending upon the nature and quality of pastoral care.

Many Christians who would possibly benefit from psychotherapy would prefer to go to clergymen with their problems than to other helping professionals. Others refuse to seek psychotherapy without the consent or sanctioning of their religious leaders. Still a few don't even get the approval for therapy by their pastors. How often has the writer heard the expression, "I hope my pastor does not find out I'm coming here. . . ." Lack of approval of an influential religious leader who is much like a "parent figure" can do much to inhibit therapeutic progress. Part of our task is to educate religious leaders and to underscore with them the importance of religion and their roles as religious figures to psychotherapy.

More attention needs to be focused on analyzing the root commonalities between the psychotherapeutic process and the religious process. Indeed it would appear *prima facie* that religion and psychotherapy are to some degree similar inasmuch as both purport specific views on human nature, unlike most of the exact sciences. Because psychotherapy involves therapy of the psyche and the ego, it is continually involved with formulating specific opinion on human nature, ability and potential. Whenever the terms "ego," "personality" or "intrapsychic conflict" are used, one is already engaged in the

description of human qualities. And religion, particularly the Christian religion, always function in accordance with certain views of people and their potential. For example, the Christian church stresses moral and social responsibility, the concepts of God, Jesus Christ, our Lord, choice and temptation, sin and evil, punishment and reward.

Both religion and psychotherapy are engaged in the reference to abstract and hypothetical variables which are either inferred or incorporated into faith systems. It seems important to the writer that a healthy synthesis between religion and psychotherapy would demand that the two share common views on human nature and being. This can be done through the interdisciplinary exchanging of views on the nature of persons at seminars, workshops, symposiums, through the literature, and on clinical teams in various treatment settings.

This writer further suggests that while psychotherapy is a great and respected field of human endeavor, it cannot be regarded as being equivalent to religion. There is, of course, therapeutic modality inherent in religion, particularly the Christian religious philosophy, theology and practice. And while religion may be a latently therapeutic phenomenon, the practice of religion solely for the sake of reaping its therapeutic benefits is not only sacrilegious, but "may also be

symptomatic of deeper characterological defenses."³ It would be interesting to learn whether the converse is the case, i.e., whether psychotherapy elected to fulfill unmet religious needs is also a misuse of psychotherapy.

No therapeutic theory can be developed without an implicit or explicit image of humankind. At the same time, no religious doctrine can be possible without a general understanding of the natural human processes of life, its trends and ambiguities.⁴ It might be rightfully stated that the quality of a particular religion is based partly on the degree to which it addresses itself not only to transcendental issues and concerns, but also to such mundane matters as the physical and psychological needs of its adherents. It follows, then, that religion and especially the Christian religion can reasonably be expected to be therapeutic in one capacity or another since relatively healthy mental judgment is essential to the exercise of free will and commitment to "the cause of Christ".

Both psychotherapy and religion are concerned with helping people develop the so-called good life. Both tend to promote a life

³M. Spero, "Neurotic Conflict in the Religious Personality: Treatment Consideration," Journal of Applied Social Sciences, I (1976), p. 18.

⁴Paul Tillich, "Existentialism, Psychotherapy and the Nature of Man," in Simon Doniger (ed.) The Nature of Man in Theological and Psychological Perspectives, (New York: Harper & Row, 1973), p. 46.

that is relatively free of instinctual determinism, primitive incestuous strivings, irrationality, and uncontrolled, acting-out destructive behavior and such other clinical pictures we see in the community and in mental health treatment settings. Both religion and psychotherapy would uphold that persons should enjoy their god-given freedom to grow productively and responsibly. Only the most immature and insecure therapists would still maintain that religion is irrational. It may be used or exploited by irrational persons for irrational purposes. But it cannot be logically concluded that religion itself is irrational. It is one of the essentials to the basic security of humankind. It may well be one of the social forces that prevents many people from giving up on life.

With reference to freedom from instinct and the irrational, it should be noted that though many psychotherapists wage constant battles against fetishism and ritualism, which may be quite threatening to many religious leaders holding the extreme view, it seems that such battles are, in the main, directed towards the observance of neurotic rituals that are designed to suppress creative thinking and expression and neurotic impulses. True religious rituals, which are expressive of transcendent strivings and participation within a corporate fellowship such as that which is experienced in the average Christian church, are aides to therapeutic growth and are not harmful to the therapeutic community and its goals for the patient. Fetish behavior is also not in the true interests of religion inasmuch as such is destructive of true

creative growth.

Fromm observed the mastery of the unconscious from the anti-instinctualism of the Ten Commandments. In fact, although Freud is often criticized for having considered the biblical expression "Love thy neighbor" as unachievable considering the true nature of humankind, he later admitted that this very Judeo-Christian imperative was a profound step in the process of sublimating incestuous tendencies into productive, interpersonal relationships.⁵ Freud said, "What is the point of a precept enunciated with so much solemnity if its fulfillment cannot be recommended as reasonable?"⁶ However, what is often overlooked is a statement he made later:

There are certain ties between men which operate against war... In the first place they may be relations resembling those toward a loved-object, though without having a sexual aim. And there is no need for psychoanalysis to be ashamed to speak in this connection, for religion itself uses the same words: "Love thy neighbor as thyself."⁷

Perhaps the first error Freud made was to view the Biblical commandment as a concept which could only work if the love required was profitable and deserved, which is a concept prevalent in 19th century Bourgeois ethics.

⁵E. Fromm, The Anatomy of Human Destructiveness (New York: Fawcett, 1973)

⁶Sigmund Freud, Civilization and Its Discontents (New York: Norton, 1961; originally published 1929), pp. 57 and 212.

⁷Ibid., p. 212.

Both religion and psychotherapy advocate the freely governed life and autonomous moral development and human action. Moral development is essential to the development of responsible free will.⁸ Nuttin also maintains that even if one is committed to determinism, such as that which is implied in the Christianity, one's de facto perception of free will within the realm and range of human action and moral development is all that is of relevance to the understanding of human behavior. It is not considered the task of psychotherapy to assist people beyond the point acquiring or regaining the mental potential for reasoning and the exercising of free will. In this sense psychotherapy is committed to moral development. However, it does not usually align itself with any particular ethical theory or judgment. Many psychotherapists do choose to live moral lives while others tend to make no such commitment. But blessed are the patients whose therapists do possess and project some sense of moral and ethical judgment and responsibilities, for they shall be good role models for those who are seeking wholeness.

Freud, although he was allegedly anti-religionist, was clearly not opposed to ethical civilization nor to non-fetishized religion, except in the view of those who have adopted Marcuse's misinterpre-

⁸J. Nuttin, Psychoanalysis and Personality (New York: Mentor, 1962), p. 73.

tations of Freud's analyses of civilization.⁹

It may be said that psychotherapy is compatible with the Christian religion, and particularly the mainline Protestant tradition, because it is a process dedicated to free will and free movement in human nature. Psychotherapy is a process dedicated to self-determined growth and freedom of choice as is the Christian religion, rightfully interpreted.

Both psychotherapy and the Christian religion tend to view people with a mixture of pessimism and optimism. Each considers that people can be, and often are in one kind of bondage or another, but can be much freer than at present. Both seek to offer hope versus despair and trust versus mistrust. Psychotherapy and the Christian religion are also aware of the dual conflict in human nature: between the self in bondage and the self in freedom; between the infantile and the dependent versus the mature and independent. Both agree that there is potential stability in human personality, but that such stability can often become stagnant and rigid. Psychotherapy calls this "fixation," religion terms it "hardness of the heart."

At the opposite end of the continuum, both psychotherapy and Christianity recognize that people can change or "become converted." Neither of the two can be very helpful to us without commitment to this

⁹ Fromm, p. 87.

principle. Yet both would admit that not all changes are necessarily for the good. Both would also agree that the person should move forward in a positive direction as does the Christian's God, by His dynamic nature. The messianic world-view of our Judeo-Christian tradition affirms this. Yet there is both religious and psychotherapeutic value in viewing experience in retrospect. Psychotherapy calls this reflection and insight. Christianity calls it repentance and commemoration. Both are based on an awareness of the past, but living in the here and now, and moving toward the future and the reconstruction of the personality.

The writer suggests that, in many ways, insight in psychotherapy is similar to confession and repentance in the Christian religion because both entail the release of bottled-up guilt which facilitates psychic stability. Both involve revelation (human or divine) or insight which leads to mental health, spiritual and psychic freedom and the peace of mind for which all persons crave. Both religion and psychotherapy involve the acceptance and resolution of guilt. One unique feature of the Christian confession is that it is a conscious worshipful act or ritual which usually involves moral judgment on the act done. A person can only confess to an act which was consciously or knowingly done. Psychotherapy deals mostly with unconscious guilt which gives rise to depression and anxiety. The Christian religion inspires the person to "go in peace and sin no more."

Yet, the more sophisticated religious leaders, churches and denominations recognize that human beings are, inescapably, sinners.

Psychotherapy does not require or coerce one to confess in the strict religious sense of the word. It is not the task of psychotherapy to bring moral or religious judgment on the material confessed, in confidence, by the person. The goal of therapy is relief from tension and the resolution of the underlying neurotic guilt which gives rise to it.

Christian religion, and particularly Protestantism, does not require the active or passive participation of second party human agents in order for a confession or prayer to be valid. In Christianity, Jesus Christ, the Son of God, is the believer's only true Mediator and Advocate. Members of the fellowship are encouraged to pray for each other and for the whole world. Although many sins may remain unaffected because memory of their existence has been repressed or suppressed, psychotherapy has a quasi-religious function in bringing sin and the resulting neurotic guilt to awareness so that adequate resolution can occur and the person's psychosocial functioning might improve. Religious faith and experience aim at the absolution of real guilt through prayer, repentance, confession and pastoral counseling.

The close relationship between religion and psychotherapy is clearly seen in the correlation between religious process and therapeutic process. While they are not mutually identical, they are mutually

related in process. Frequently, repentance itself may also be therapeutic. The minister must realize that however absent from psychotherapy is the *Fides Reflexa* (the conscious, reflective and deliberate response to the Word of God) psychotherapy may help to lay the groundwork for *Fides Reflexa*.

Psychoanalysis, psychiatry and many forms of psychotherapy have been regarded as dynamic because they regard human beings as energetic, open systems of tension, equilibrium and conflict all of which cannot be observed on the surface of human behavior.¹⁰ It also entails the belief, sometimes mistakenly taken to imply determinism, that all human behavior is conceived as the purposeful product of some interaction between internal psychic forces and the forces and limitations of external reality. Therefore, for psychotherapy, "depth and dynamic" connote complexity and intrapsychic conflict. For Christianity, these same terms imply ultimacy and Christ-oriented or motivated growth.

Synthesizing or ratifying the conflicts in one's external and internal nature is another shared task of both religion and psychotherapy. However, the focus of psychotherapy is upon the resolution of intrapsychic or interpersonal conflict, while religious experience on

¹⁰P. Pruyser, "Toward a Doctrine of Man," in Doniger, p. 36.

the other hand, though dedicated to the social components of life, is strongly concerned with people's relationship with God, and the inter-cosmic conflicts that often rise between the two. It must deal with conflicts between this-worldliness and other-worldliness. Such conflicts may be beyond psychology's diagnostic and treatment framework.

The notion of psychotherapy as an element of religious experience needed to be entertained in this dissertation. If it is accepted that through self-discovery in the therapeutic process a person can move closer towards religious consciousness, then there must be other potentially religious elements in psychotherapy. Yet, again, psychotherapy is not a religious phenomenon because the religious encounter is absent in the psychotherapeutic process. Religious encounter is essential to any meaningful religious experience. This is not to say that there is an absence of therapeutic encounter. However, religious as well as therapeutic encounter are dissimilar to ordinary interpersonal encounter. The I-thou encounter with God takes place in religious settings or meetings where successive responses take place between the worshipper and God. Encounter in psychotherapy is not always an I-thou situation.¹¹

The supposed non-judgmental stance of psychotherapy as

¹¹E. Becker, The Denial of Death (New York: Free Press, 1974), p. 28.

opposed to the judgmental and moral standards of religion need to be examined. Persons suffering from neuroses or psychoses are not morally inferior from the psychological point of view.¹² Although there are those, even today, who maintain that mental illness is a form of Divine punishment, there is general reluctance to apply such terms as "right" and "wrong" where mental illness is concerned.

It is philosophically and ethically incorrect to say that psychological dysfunction of any given type is a "wrong" state to be in, given the social tendency to suspend moral judgment on persons who are not in complete conscious control over their actions. A case in point is the Durham Rule: the so-called legal plea of innocence by virtue of insanity. Another case in point is the Biblical consideration that homosexuality and other sexual deviations are "abominations", which still needs to be carefully examined and put in good Christian ethical perspective.

Psychotherapists are guilty of employing such value judgments as "appropriate" and "inappropriate" and/or "functional" and "dysfunctional". To argue that these are not value judgments but simply practical considerations is weak, for what is practical and non-practical may, in many cases, be reduced to a question of values.

¹²Pruyser, pp. 6-8.

For example, not every eccentric person who chooses to be alone is necessarily inappropriate. The church has always had its hermits, mystics and ascetics who behave as such in the name and service of the church and holiness. What does seem appropriate or non-pathological is that these apparently lonely persons do maintain some sort of communication with the church and, of course, with the Divine.

The psychotherapist would do well to accept certain acquired religious values of the patient and to work within that context without attempting to usurp or destroy these values, lest damage be done to the client's ego structure. For example, if a patient's religion has firmly taught him that masturbation is a sin, there is no therapeutic value in the therapist's taking the judgmental position that it is not sinful to masturbate if he, indeed, intends to establish a lasting and meaningful therapeutic relationship with the patient. Any former religious and moral concepts and interpretations held by the patient can eventually be discarded, by him or her, and supplanted with more reality-oriented belief systems as the patient gains insight. Also, there is no reason why a good therapist cannot accept, for the sake of the patient's religious world-view, such universal concepts as guilt, evil, sin, belief in God, church attendance, immorality, etc. The fundamental difference, however, between these two examples is that the goal in the latter would not involve the eventual abandonment of religious perceptions as it would be in the case of a patient who manifests

psychopathological symptoms of hallucinations.¹³

Since there is much of it in our world, the problem of anxiety needs to be dealt with by both religion and psychotherapy. It seems that the times in which we live are characterized by a breakdown of the social order for better or for worse; a breakdown of power and authority, which are among the prerequisites for breakthrough anxiety.¹⁴

The question is whether it is possible to remove, by a successful analysis, not only neurotic forms of anxiety, but also its genuine forms--the anxieties of finitude, of guilt, of emptiness. Many psychoanalysts believe that both forms of anxiety can be removed because there is no qualitative difference between them. They all can be treated as neurosis, capable of being healed. This would also include the anxiety of having to die, the anxiety of having to become guilty, the anxiety of lacking a meaning of life. But any therapist who believes this has overlooked the essential and existential dimensions of mental disorders, which is why, as Tillich asserts, psychoanalysis needs a

¹³Karl Menninger and P. Pruyser, "Morals, Values and Mental Health," in Encyclopedia of Mental Health (New York: Watts, 1963) IV, p. 43.

¹⁴Tillich, pp. 49-50.

philosophical matrix.¹⁵ Neurotic anxiety is misplaced compulsory anxiety, and not the basic anxiety about everything being finite.

Basic anxiety is anxiety about being bound to the law of coming from nothing and going to nothing. Neurotic guilt is misplaced compulsory guilt feeling and not the existential experience of being guilty of a definite concrete act which expresses the general estrangement of our existence, an act for which responsibility cannot be denied, in spite of the element of destiny in it.¹⁶

Neurotic emptiness is a compulsory flight from meaning and from meaninglessness. If these neurotic phenomena are confirmed with the universal structures of existence which make neurotic phenomena possible, it means that there has been an unreflective and unsophisticated understanding of the nature of man and the nature of life on the part of the healer.¹⁷ No great physician has ever claimed that he or she can change the biological structures of life; and no psychotherapist from whatever school he comes should claim that he or she can change the structures of life in the dimension of self-awareness usually called the psychological dimension. But the healing of mental disorders which follow from the relation of man's existential to his essential nature can be asserted as a possibility.

¹⁵Ibid. , p. 50.

¹⁶Ibid.

¹⁷Ibid.

Anxiety will be with us as long as human growth and development entails a period of total dependency and the person's fear of loss of love and love objects. Inability to experience this ontological emotion can result in a maladjusted personality.

Christianity, among other great religions of the world, with its Pauline theology of "faith, hope and love," prepares its followers to cope with human existence, human absurdities, sin and evil and related anxiety by the establishment of a meaningful relationship with God, through Jesus Christ and the members of the community.

Helping persons, merely, to escape from anxiety is not the task of either psychology or religion. As Erik Erikson said:

It seems more worthwhile to speculate on the fact that religion through the ages has seemed to restore a sense of trust at regular intervals in the form of faith, while giving tangible form to a sense of evil which it proposes to ban... whatsoever says he has religion must derive a faith from it which is transmittal to infants in the form of basic trust; whosoever claims he does not have religion must derive such basic faith from elsewhere.¹⁸

If he does not already have one, the therapist may do well to develop a sense of religious faith which may in some way be transmitted to the patient.

Psychology as self-knowledge is self-deception,¹⁹ as Rank

¹⁸Erik Erikson, Identity and Life Cycle (New York: International Press, 1959), pp. 64-65.

¹⁹Otto Rank, Will Therapy (New York: Knopf, 1932), p. 23.

put it, which means that psychotherapy cannot offer persons what they crave for most--immortality. If this can be promised or offered at all, it falls within the realm of religion which deals more intently with life in the here and now as well as life in the hereafter. Psychotherapy has its limitations. It can help persons gain relief of neurotic guilt and discover a more meaningful existence, but it cannot replace the unsatisfied transcendental and true religious experiences which help to guide persons toward the existence and sense of worth which are beyond human nature.

Religion and psychotherapy are not one and the same, nor are they diametrically opposed to each other, but one can be complementary to the other. Religion has in it certain therapeutic elements. However, psychotherapy falls short of being considered a religious phenomenon. Each can enhance the spiritual, intellectual, emotional and psychosocial growth of persons. Each can promote freedom, authenticity and human potential.

For religion, sin is rebellion. For psychotherapy, sin would be parallel with egocentricity or ego-enthronement. This sin could also be considered as rebellion against God, for it would mean replacing God with a shrine or throne to the ego. The origin of sin is not in one's contingent existence but rather in the person's will which manifests itself in self-love, pride, egocentricity and open rebellion and sometimes downright hostility towards God. Such problems may

be dealt with through religious experience as well as through psychotherapy.²⁰

Occasionally, schools of psychology such as Humanistic or Transpersonal Psychology, which have deep roots in Logotherapy will profess to answer humankind's transcendental needs. But in reference to such systems of psychology, one scholar wrote:

Man longs to transcend his aloneness and belong to the cosmos. Even when he has filled secular needs, the hunger for transcendence is not satiated. So it was a short step from actualization to transcendence, from peak experiences to God. Maslow didn't say out loud that psychology was once again flirting with theology. But like William James and Carl Jung before him, he was struck by the idea that normality and the one-dimensional consciousness of secular society were adequate ideals for those unimaginative persons who sought a minimal adjustment to the savage glory of the human condition.²¹

In accordance with the Christian world-view, transcendence, especially transcendence to God, through Jesus Christ, is among the highest goals of the true believer. The psychotherapeutic mode in our society today cannot help persons accomplish these strivings. But psychotherapy, working side by side with religion, can be instrumental in helping persons to reach this deeper desired goal. As Keen continues:

²⁰S. Keen, "Transpersonal Psychology: The Cosmos Versus the National," Psychology Today, VII (July 1974), 56-59.

²¹Ibid., p. 60.

Both therapist and client are committed to the realization of the human vocation as a self-conscious participant in a Divine order. The only way out of alienation is the vision of the transcendent citizenship of the human spirit.²²

Becker regarded patients' attempts to analyze their motives when they felt anxious as penis-envy, incestuous attraction, castration fear, oedipal rivalry, and so on.²³

The goal of religion is the same as that of psychotherapy, that is, pursuing or promoting the "good life" from the standpoint of mental health and the Christian faith. They should both be concerned about the symptoms and signals suggesting the fear that one may be losing the love of God and human love which are essential to transcendence, health and wholeness. Next to the worship hour, the therapeutic hour is one of the most important for dealing with the neuroses of our times.

²²Ibid. , p. 57.

²³Becker, p. 36.

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